

From: Cashour, Curtis
Sent: 25 Jun 2019 17:48:21 +0000
To: (b)(6) (b)(6) (b)(6) (b)(6) E.
(Physician);Selnick, Darin
Cc: Hutton, (b)(6) (b)(6) T.
Subject: RE: [EXTERNAL] Deadline inquiry on Spravato

Thanks.

Curt Cashour
Press Secretary
Department of Veterans Affairs
202-461-7388
Curt.Cashour@va.gov
[@curtcashour](#)

From: (b)(6) (b)(6)
Sent: Tuesday, June 25, 2019 1:47 PM
To: Cashour, Curtis <Curt.Cashour@va.gov>; Matthews, Kameron <Kameron.Matthews@va.gov>;
(b)(6) (b)(6) E. (Physician) (b)(6) Selnick, Darin
<Darin.Selnick@va.gov>
Cc: Hutton, James <James.Hutton@va.gov>; (b)(6) (b)(6) (b)(6)
(b)(6) (b)(6) T. (b)(6)
Subject: RE: [EXTERNAL] Deadline inquiry on Spravato

Please see updates below

The comment refers to the number of non-VA providers in the department's community care network, which has increased from [224,433] providers in October of 2016 to [548,644] providers as of the end of May 2019.

(b)(6) J. (b)(6) PMP
Executive Officer to the Deputy Under Secretary
for Health for Community Care
Office of Community Care
P (b)(6)
C (b)(6)
Email: (b)(6)

From: Cashour, Curtis
Sent: Tuesday, June 25, 2019 1:39 PM
To: Matthews, Kameron <Kameron.Matthews@va.gov>; (b)(6) (b)(6)
(b)(6) (b)(6) (b)(6) E. (Physician) (b)(6)
Selnick, Darin <Darin.Selnick@va.gov>
Cc: Hutton, James <James.Hutton@va.gov>
Subject: FW: [EXTERNAL] Deadline inquiry on Spravato

Please see below from CQ.

Can you concur on the following and fill in the highlighted portions?

Q: Also, President Trump said there 200,000 more VA doctors, nurses and PAs today than when he was elected.

A: That's not what he said. He said that today, there are 200,000 more doctors, nurse practitioners, and physician assistants who treat veterans than in October of 2016.

The comment refers to the number of non-VA providers in the department's community care network, which has increased from [need number] providers in October of 2016 to [need number] providers today.

Curt Cashour
Press Secretary
Department of Veterans Affairs
202-461-7388
Curt.Cashour@va.gov
[@curtcashour](#)

From: Lauren Clason <laurenclason@cqrollcall.com>
Sent: Tuesday, June 25, 2019 1:18 PM
To: Cashour, Curtis <Curt.Cashour@va.gov>
Subject: [EXTERNAL] Deadline inquiry on Spravato

Hi Curt,

Secretary Wilkie said on the conference call a little while ago that the VA is using Spravato at facilities in the northeast and would be expanding in the next year.

Given that the drug was not approved for the formulary, could you clarify those comments?
How long has the VA been using Spravato, and at what facilities?
Approximately how many veterans have been treated with Spravato?
Which facilities will be allowed to use the drug over the next year, during the planned expansion?

Also, President Trump said there 200,000 more VA doctors, nurses and PAs today than when he was elected. According to budget [documents](#), there are only 50,000 more employees total since 2016. Could you explain where the president's number came from?

Thanks, my deadline is 4pm.

--

Lauren Clason
Health Care Reporter
CQ Roll Call
765.271.7095
laurenclason@cqrollcall.com

From: Connell, Lawrence B.
Sent: 26 Jun 2019 13:28:58 +0000
To: Selnick, Darin
Subject: RE: [EXTERNAL] Re conference call with Pres Trump & VA Sec Robert Wilkie....

Yeah, you can send the info to her. Not sure exactly what she wants.

There's lots of open source info on the drug e.g. <https://www.nytimes.com/2019/03/08/health/depression-drugs-ketamine.html>

And this: <https://www.statnews.com/2019/06/21/va-declines-broad-coverage-for-new-jj-depression-drug-touted-by-trump/>

Any idea what she is looking for other than General Info?

Larry Connell
Chief of Staff
Veterans' Health Administration
lawrence.connell@va.gov
202.461.7016

-----Original Message-----

From: Selnick, Darin
Sent: Tuesday, June 25, 2019 5:08 PM
To: Connell, Lawrence B. <Lawrence.CConnell@va.gov>
Subject: RE: [EXTERNAL] Re conference call with Pres Trump & VA Sec Robert Wilkie....

Do you want her to contact him directly? Or do you want him to send me the information she wants and I will send it to her.

Darin

Darin Selnick
Executive Consultant
Office of the Secretary
Cell 202-304-6582

-----Original Message-----

From: Connell, Lawrence B.
Sent: Tuesday, June 25, 2019 4:38 PM
To: Selnick, Darin <Darin.Selnick@va.gov>
Subject: RE: [EXTERNAL] Re conference call with Pres Trump & VA Sec Robert Wilkie....

Darin,

Dr. (b)(6) is the VISN8 CMO and the Ketamine expert. You need me to link you guys up?

Larry Connell
Chief of Staff
Veterans' Health Administration
lawrence.connell@va.gov
202.461.7016

-----Original Message-----

From: Selnick, Darin
Sent: Tuesday, June 25, 2019 1:48 PM
To: Connell, Lawrence B. <Lawrence.Connell@va.gov>
Subject: RE: [EXTERNAL] Re conference call with Pres Trump & VA Sec Robert Wilkie....

I think she may be referring to Spravato.

Darin

Darin Selnick
Executive Consultant
Office of the Secretary
Cell 202-304-6582

-----Original Message-----

From: Selnick, Darin
Sent: Tuesday, June 25, 2019 1:46 PM
To: Connell, Lawrence B. <Lawrence.Connell@va.gov>
Subject: FW: [EXTERNAL] Re conference call with Pres Trump & VA Sec Robert Wilkie....

Hi Larry

Can you track down an answer to this question?

Thanks

Darin

Darin Selnick
Executive Consultant
Office of the Secretary
Cell 202-304-6582

-----Original Message-----

From: (b)(6)@aol.com
Sent: Tuesday, June 25, 2019 1:35 PM
To: Selnick, Darin <Darin.Selnick@va.gov> (b)(6)@aol.com
Subject: [EXTERNAL] Re conference call with Pres Trump & VA Sec Robert Wilkie....

Good afternoon Darin,

I was very honored to be on the conference call today with Pres Trump & VA Sec Robert Wilkie, and other Veterans, regarding the VA Mission Act.

As a Veterans Advocate, it is important to me to get as much info as possible when it comes to Veterans issues.

With that being said, I heard something about a spray to help our Depressed & Suicidal Veterans.

Could you please send me more information on that, as being out here in the field, there is always a great delay in getting up-to-date information, and each day that we can save the life of a Veteran....is priceless.

Thanks again....and have a blessed day!

(b)(6) USMC-USMCR 20 years, Gulf War Veteran & Veterans Advocate.

Florida Gov. Ron DeSantis "Forward March" Initiative / Board Member Orlando-Lake Nona VA Hospital/
Board Member

Email (b)(6)@aol.com (b)(6)

"I am a Veteran - I am an Asset..NOT a Liability"

From: Hipolit, Richard (OGC)
Sent: 2 Jul 2019 09:49:13 +0000
To: Byrne, Jim;Hogan, Michael R. (OGC);Mitrano, Catherine (SES) (OGC);Pope, Brent (OGC);Bader, Christine E.
Subject: FW: [EXTERNAL] 1 July Veterans Affairs Media Summary and News Clips
Attachments: 190701_Veterans Affairs Media Summary and News Clips.docx, 190701_Veterans Affairs Media Summary and News Clips.pdf

Item 1.1 today is a Wall Street Journal commentary on the Supreme Court's recent Kisor decision by an American Enterprise Institute fellow. The author, who has written a book on limiting the power of the so-called administrative state, stresses Justice Gorsuch's concurring opinion and contrasts it to the majority opinion. The author correctly notes that the decision does open the door for the courts to be less deferential to agencies by concluding that the meaning of particular regulations can be discerned using rules of construction, so that deference to the agency that issued the regulations is not necessary. He predicts the case will return to the Supreme Court, after further action by the Federal Circuit, but I'm not so sure.

Items 1.2 and 2.1 report on VA's approval of the ketamine based drug Spravado for use by Veterans in VA care. Item 2.1 notes the allegation that members of the Mar-a-Lago club may have influenced the decision.

Item 1.3 discusses litigation stemming from the death of an individual after an altercation with VA police at the Kansas City VAMC. The article suggests a cover up by the local director, but I believe VA is still waiting on local authorities before reaching a conclusion on the matter.

Item 6.7 reports on a positive outcome for a Veteran in a Kentucky Veterans Court that operates in conjunction with VA.

Sent with BlackBerry Work
(www.blackberry.com)

From: VA Media Analysis <VAMediaAnalysis@barbaricum.com>
Date: Monday, Jul 01, 2019, 5:18 AM
To: Barbaricum VA Media Analysis <VAMediaAnalysis@barbaricum.com>
Subject: [EXTERNAL] 1 July Veterans Affairs Media Summary and News Clips

Good morning,

Please find the attached Veterans Affairs Media Summary and News Clips.

.....
BARBARICUM



Veterans Affairs Media Summary and News Clips

1 July 2019

1. [Top Stories](#)

1.1 - The Wall Street Journal: [Is the Supreme Court's Job to Defer? Kagan and Gorsuch clash over separation of powers and the right method of interpreting regulations](#) (30 June, Peter J. Wallison, 11.7M uvm; New York, NY)

The Supreme Court last week decided an important case in a way that left many observers confused about what it had actually done. At issue in *Kisor v. Wilkie* was whether to overturn *Auer v. Robbins* (1997), which held that lower courts must defer to federal agencies' interpretations of their own rules. The justices voted unanimously to send the case back to the lower court, which had invoked *Auer* deference in approving a Veterans Affairs Department interpretation of its own rule.

[Hyperlink to Above](#)

1.2 - Herald-Tribune: [VA approves psychedelic ketamine for PTSD treatment](#) (30 June, Billy Cox, 203k uvm; Sarasota, FL)

This month's decision by the U.S. Department of Veterans Affairs to offer a psychedelic drug to treat post-traumatic stress disorder while marijuana remains off limits is leaving some stakeholders flummoxed amid the ongoing wave of veteran suicides.

[Hyperlink to Above](#)

1.3 - The Kansas City Star (Video): ['Queen of cover-ups': Head of Kansas City VA hospital has history of withholding info](#) (30 June, Andy Marso, 164k uvm; Kansas City, MO)

The leader of the Kansas City VA Medical Center has been under fire for withholding information about a patient's death, allegedly at the hands of Veterans Affairs Police. That secrecy seems to be a pattern. Years earlier, that leader, Kathleen Fogarty, was also accused of cover-ups at her previous job as head of a Tampa, Florida, VA hospital.

[Hyperlink to Above](#)

2. [Improving Customer Service](#)

2.1 - Forbes: [Veterans Affairs Approves 'Ketamine-Like' Drug Despite Cost, Doctors' Misgivings](#) (30 June, Janet Burns, 34.3M uvm; New York, NY)

In June, the Department of Veterans Affairs chose to approve the use of a new, expensive antidepressant despite concerns about the drug's effectiveness, and a backdrop of political speculation about the president's involvement.

[Hyperlink to Above](#)

2.2 - U.S. News & World Report (AP): [Cicilline Plans Event for Vets With Veterans' Committee Head](#) (30 June, 12.3M uvm; Washington, DC)

U.S. Rep. David Cicilline is planning a barbecue for veterans with the head of the House Veterans' Affairs Committee. The Rhode Island Democrat announced Thursday that he's holding a community conversation and barbeque at the Slater Memorial Park pavilion in Pawtucket. House Veterans' Affairs Committee Chairman Mark Takano, a California Democrat, plans to attend the July 14 event. It begins at noon.

[Hyperlink to Above](#)

2.3 - WBKO (ABC-13, Video): [June is PTSD Awareness Month, local veteran shares his battle](#) (30 June, Allie Hennard, 46k uvm; Bowling Green, KY)

June is PTSD Awareness Month and one local veteran has shared his story to in hopes of bringing awareness year-round. About 11-20 out of every 100 veterans who served in the Iraq or Afghanistan wars will suffer from post-traumatic stress disorder in a given year, according to the National Center for PTSD.

[Hyperlink to Above](#)

2.4 - The Gainesville Times: [Sam Walley's journey through war, wounds and recovery](#) (28 June, Nick Bowman, 27k uvm; Gainesville, GA)

Samuel Walley's mind was clear as the blast separated the soldier from the earth and two of his limbs, lifting him 20 feet on a cloud of dust and adrenaline and death. He's younger than he looks, leaning forward over a coffee table in the over-air-conditioned lobby of the Martha T. Nesbitt Academic Building at the University of North Georgia Gainesville campus. Covered in tattoos but holding onto the clean-cut military haircut, he navigates life using a prosthetic leg and a head full of experience and memories that most 26-year-olds in Gainesville are blessed to be without.

[Hyperlink to Above](#)

3. [Business Transformation](#)

4. [DOD Cooperation / Electronic Health Records / MISSION Act Implementation](#)

5. [Suicide Prevention](#)

5.1 - Times Record: [Community Matters: Unlocking the veteran suicide crisis](#) (30 June, Sen. John Boozman (R-Ark.), 15k uvm; Fort Smith, AR)

A retired colonel in the Arkansas National Guard recently shared his frustration with missing the signs of mental health struggles among a former soldier under his command. Similar tragedies are happening daily across the country, but veterans — who represent about eight percent of Arkansas's population — are particularly vulnerable. Sadly, they account for about 20 percent of suicides in our state.

[Hyperlink to Above](#)

6. [Women Veterans / Homelessness / Benefits / Cemeteries](#)

6.1 - WSOC (ABC-9, Atlanta Journal-Constitution): [Community comes together to help 99-year-old World War II veteran facing eviction](#) (30 June, Jeremy Turley, 327k uvm; Charlotte, NC)

Even though they are usually not the type of people to ask for help, Marian Ryttonen and her family needed a hand. The 99-year-old World War II veteran was facing eviction from her

nursing home after a trusted caretaker allegedly embezzled her life savings and payments she should have gotten from the Department of Veterans Affairs were stuck in bureaucratic limbo.

[Hyperlink to Above](#)

6.2 - Staten Island Advance: [Smart home will be a life changer for veteran who changes lives](#) (30 June, Ann Marie Barron, 161k uvm; Staten Island, NY)

Michael Sulsona can reach deep into a broken war veteran's heart and find strength, determination and hope. But reach the top shelf in a kitchen cabinet? That's been a challenge for the retired Marine Corps sergeant ever since the day he lost both of his legs to a land mine while serving in central Vietnam.

[Hyperlink to Above](#)

6.3 - The Topeka Capital-Journal: [Harry Colmery's niece recalls humility of World War I pilot, GI Bill...](#) (30 June, Tim Carpenter, 62k uvm; Topeka, KS)

Jean Colmery Roberts remembers well the late 1943 visit from her uncle at her apartment outside of Washington, D.C. Her guest was Harry Colmery, who was weary from a long night composing on Mayflower Hotel stationary a draft of what evolved into the GI Bill of Rights.

[Hyperlink to Above](#)

6.4 - Johnson City Press: [Giving credit to those who served in U.S. Nurse Cadet Corps](#) (30 June, Robert Houk, 33k uvm; Johnson City, TN)

Agnes Lowe is on a mission. The retired nurse is asking Congress to recognize her and other former members of the U.S. Cadet Nurse Corps as veterans of World War II. She doesn't want proclamations, medals or medical benefits from the U.S. Department of Veterans Affairs. Lowe simply wants nurse cadets given credit for their service to the country with an honorable discharge and veteran burial status.

[Hyperlink to Above](#)

6.5 - Observer-Reporter: [VetFest bring services to Wild Things Park](#) (30 June, Scott Beveridge, 24k uvm; Washington, PA)

Iraq War veteran John Corl said he bounced around homeless shelters until he sought services from the Wounded Warrior Project in Pittsburgh. The Green Tree man said getting help for his service-related issues brought him to the point where he's now ready to enroll in college and gain employment. "Wounded Warrior helped me," Corl said Saturday at VetFest at Wild Things Park in North Franklin Township.

[Hyperlink to Above](#)

6.6 - The Indiana Gazette: [Indiana County VA director set to retire](#) (30 June, Chauncey Ross, 16k uvm; Indiana, PA)

For better and worse, technology and bureaucracy have provided some of the biggest changes in service to American military veterans over the past four decades. For all the ups and downs assured by 44 years in one job, and for what the cliché of a rollercoaster ride could too easily be applied, heading Indiana County's Veterans Affairs office been a trip that Brenda Stormer said she never wanted to end.

[Hyperlink to Above](#)

6.7 - The Daily Independent: [Court program gives veterans second chance](#) (30 June, Carly Carver, Ashland, KY)

A United State Marine has a chance at a fresh start thanks to hard work and a specialized court program led by circuit court judges in conjunction with the VA. Veterans Court assists veterans in need. James "Jim" Blankenship, a United States Marine Corps veteran, graduated from Boyd County Circuit Court's Veterans Court Program on Thursday, with all criminal charges being dismissed and diverted.

[Hyperlink to Above](#)

7. [Other](#)

7.1 - The Daily Caller: [Hassan Likely Didn't Notify Constituents Whose Data May Have Been Exposed, Despite Pushing Law Requiring It For Companies](#) (30 June, Luke Rosiak, 3.9M uvm; Washington, DC)

Sen. Maggie Hassan's computer system was hacked in what prosecutors called the "largest data theft in Senate history," yet there is no evidence she informed constituents who may be at risk of identity theft as a result — despite being one of the most vocal advocates for laws requiring hacking victims to do just that.

[Hyperlink to Above](#)

7.2 - National Catholic Register: [After Amputation, Student Turns to Football — and Faith](#) (30 June, Stephen Beale, 321k uvm; Irondale, AL)

At first they thought they were bone cysts. Sebastian Bonaiuto, then an eighth-grader heading into high school, was having trouble with his left ankle, and his foot was getting swollen. In August 2016, he had a surgery to remove what doctors believed was a cyst in his left heel bone. A second surgery occurred one month later.

[Hyperlink to Above](#)

[Back to Top](#)

1. [Top Stories](#)

1.1 - The Wall Street Journal: [Is the Supreme Court's Job to Defer? Kagan and Gorsuch clash over separation of powers and the right method of interpreting regulations](#) (30 June, Peter J. Wallison, 11.7M uvm; New York, NY)

The Supreme Court last week decided an important case in a way that left many observers confused about what it had actually done. At issue in *Kisor v. Wilkie* was whether to overturn *Auer v. Robbins* (1997), which held that lower courts must defer to federal agencies' interpretations of their own rules. The justices voted unanimously to send the case back to the lower court, which had invoked *Auer* deference in approving a Veterans Affairs Department interpretation of its own rule. The majority opinion, written by Justice Elena Kagan, added a complicated set of considerations before a court could defer to an agency's rule. In effect this new rule replaced *Auer* deference.

Yet the court was divided on whether anything should supplant the former rule. The three other liberals concurred with Justice Kagan, while the four conservative associate justices joined most or all of a concurring opinion by Justice Neil Gorsuch. Chief Justice John Roberts signed on to most of the Kagan opinion, which made it the court's formal decision. But he also wrote in a concurring opinion that "the distance between the majority and Justice Gorsuch is not as great as it may initially appear." That distance is nonetheless significant.

A major problem with *Auer* deference is its inconsistency with the Administrative Procedure Act, which says that courts should determine the meaning of statutes and regulations. Deferring to an agency's interpretation would seem to violate that directive. But Justice Kagan argues that deference may still be appropriate if, after using "all the standard tools of interpretation," the court cannot resolve an ambiguity. "Only when that legal toolkit is empty and the interpretive question still has no single right answer can a judge conclude that it is 'more [one] of policy than of law.'" If the issue is policy and not law, she reasons, a judge should defer to an agency's expertise—provided that its interpretation is "reasonable."

If lower courts take Justice Kagan's opinion seriously, the result will be a limited deference rule that significantly reduces the power of administrative agencies to interpret their rules. But that wasn't enough for Justice Gorsuch.

He argued that anyone who appears before a federal court is entitled to a fair and unbiased hearing, as well as the court's best judgment about the meaning of the statute that authorized the contested rule. In his view, *Auer* deference—even under Justice Kagan's more restrictive formulation—puts the government's thumb on the scale. If the reviewing court cannot resolve an ambiguity in the regulation's language, a tie goes to the agency, so long as its determination is "reasonable."

A reasonable reading, however, may not be the same as the court's best reading of what a statute or regulation says. "After all," Justice Gorsuch writes, "if the court agrees that the agency's reading is the best one, *Auer* does no real work; the doctrine matters only when a court would conclude that the Agency's interpretation is not the best or fairest reading of the regulation" but is reasonable as a matter of policy. Yet the APA says reviewing courts should

"decide all relevant questions of law" and "set aside agency action . . . found to be . . . not in accordance with law."

In addition, Justice Gorsuch wrote, the Constitution creates a separation of powers among Congress, which makes the laws; the executive, which enforces the laws; and the judiciary, which, as Chief Justice John Marshall said in *Marbury v. Madison* (1803), has "the province and duty . . . to say what the law is." A requirement that the judiciary defer to the executive's interpretation of law may not be consistent with this separation.

Finally, there is the rule of law. Justice Kagan's formulation suggests that when a court cannot resolve an ambiguity in a rule, it is in effect faced with a question of administrative policy. The court should defer, Justice Kagan argues, because policy is different from law, and beyond the court's expertise. But Justice Gorsuch argued that administrative rules and regulations are no less binding on the public than laws are, and the meaning of a law or regulation is not necessarily in line with the agency's preferred policies. "We are governed," Justice Gorsuch argued, "not by the shifting whims of politicians and bureaucrats, but by written laws whose meaning is fixed and ascertainable."

Thus, the argument between Justices Kagan and Gorsuch raises in stark form the age-old argument about whether the judiciary should determine policy in the guise of interpreting the law, or the executive should determine what the laws actually mean in the guise of its dominion over policy.

The same questions arose in the famous case of *Chevron v. Natural Resources Defense Council* (1984), in which the justices directed lower courts to defer to agencies' views when a statute itself is ambiguous. Chevron deference is much bigger and more important than Auer deference, but it is notable that in his concurring opinion in *Kisor* the Chief Justice—who in earlier cases has questioned the validity of Chevron—remarked that "I do not regard the Court's decision today to touch upon" Chevron.

After the lower court applies the deference test reformulated by Justice Kagan, it will likely return to the high court for review. Despite Chief Justice Roberts's view that Auer and Chevron are not linked, it seems that the fate of both doctrines will be determined by his view of how far the judiciary should go in deferring to executive interpretations of ambiguous laws and rules.

Mr. Wallison is a senior fellow at the American Enterprise Institute and author of "Judicial Fortitude: The Last Chance to Rein In the Administrative State."

[Back to Top](#)

1.2 - Herald-Tribune: [VA approves psychedelic ketamine for PTSD treatment](#) (30 June, Billy Cox, 203k uvm; Sarasota, FL)

This month's decision by the U.S. Department of Veterans Affairs to offer a psychedelic drug to treat post-traumatic stress disorder while marijuana remains off limits is leaving some stakeholders flummoxed amid the ongoing wave of veteran suicides.

Spravato, derived from the family of anesthetic drugs called ketamine and produced by a division of Johnson & Johnson, will be prescribed to VA clients on a case-by-case basis and administered as a nasal spray.

Ketamine variants have made headlines over the decades for their multiple roles as sedatives, recreational hallucinogens and for their impressive track records for mitigating suicidal depression. The Spravato version, which was approved by the U.S. Food and Drug Administration in March, requires patients to remain under professional observation for two hours following ingestion.

The addition of a new remedy for lowering military suicide rates at a moment when retired and active-duty personnel are killing themselves roughly 20.6 times a day was hailed as a milestone by VA Secretary Robert Wilkie. "We're pleased to be able to expand options for veterans with depression who have not responded to other treatments," he said in a statement. "It reflects our commitment to seek new ways to provide the best health care available for our nation's veterans."

But for those like Sean Kiernan, an Army veteran who attempted to take his life in 2011, the VA's simultaneous embargo on marijuana is incoherent.

"Ketamine was the most effective drug I've ever taken for suicidal thoughts — but it is not a long-term medicine you should use. I got psychologically addicted to it for four years," says Kiernan, president of the Weed For Warriors Project, which advocates legal cannabis for veterans, with 12 chapters nationwide.

"The danger with ketamine is the side effects, like on your urinary tract and gall bladder. I've had three surgeons telling me I need to have my gall bladder removed. My question is, why are you so willing and eager to accept something that, on the face of it, is the very thing you complain about with marijuana, like THC, which isn't nearly as strong? This is hypocrisy, and it makes no sense."

Catch-22 for veterans

The nation has been struggling with that contradiction since marijuana was classified as a Schedule 1 drug with the Controlled Substances Act of 1970.

The Herald-Tribune documented the Catch-22 that many veterans find themselves in and the effort of proponents to change the law last year in its "Warriors Rise Up" project.

Despite the fact that more than 2.5 million Americans are legally using medical marijuana for ailments as disparate as fibromyalgia and cancer, all drugs labeled Schedule 1 are regarded as having no medicinal value. Ketamine is a Schedule 2 substance.

CNN reported in February that the military suicide virus is now beginning to sweep the ranks of America's elite warriors, with U.S. Special Operations Command counting 22 self-induced fatalities in 2018. Eight SOCOM operators took their lives the year before. Also, in April, the self-inflicted gunshot death of a 68-year-old veteran in a VA parking lot in Virginia brought to 22 the number of veterans who've killed themselves at VA facilities in the past 20 months.

For researchers like Brad Burge, however, the willingness of establishment medicine to employ psychedelics for the treatment of PTSD and associated psychological issues bodes well for the future of marijuana. "It is good news," he says. "It shows that things are changing in the acceptance of these drugs for mental illness."

Burge is director of strategic communications for the Multidisciplinary Association for Psychedelic Studies. Founded in 1986 by New College alum Rick Doblin, MAPS is establishing scientific and legal foundations for the expanded use of psychedelics and cannabis.

The nonprofit research organization is completing Phase 3 trials on MDMA-assisted therapy. That drug, also commonly known as Ecstasy, is a controversial synthetic stimulant banned in 1985. MAPS is also studying the therapeutic applications of LSD, and it hopes to get funding for investigating Ibogaine- and Ayahuasca-assisted therapy.

Early this year, MAPS completed its first study of medical marijuana on 76 veterans diagnosed for PTSD, and will publish its results before the end of 2019. But until cannabis loses its Schedule 1 status, gaining access to acceptable samples of marijuana for the completion of MAPS' research will be difficult.

"But things are changing," says Burge. "The heads of all these administrative bodies have acknowledged there are limitations that shouldn't be there. They don't want to be put in the position of obstructing legal research."

Grilled by lawmakers in April, conservative Attorney General William Barr described the breach between the states and the feds on marijuana policy as "intolerable," though he remained opposed to national legalization. A bipartisan coalition of House and Senate members is backing the Strengthening the Tenth Amendment Entrusting States (STATES) Act. STATES would exempt all businesses and individuals engaged in state-licensed marijuana activity from federal law enforcement, but the proposal still falls short of descheduling marijuana. Congress has the ability to change marijuana's status.

For veteran Sean Kiernan, the longstanding government argument against legalizing marijuana becomes glaringly archaic when compared with the mind-altering impact of a ketamine product.

"Cannabis is nowhere near as debilitating and it allows you to function in society," he says from San Diego. "I can safely use cannabis daily for the rest of my life. But hey, if you like to party? You'll love ketamine."

[Back to Top](#)

1.3 - The Kansas City Star (Video): ['Queen of cover-ups': Head of Kansas City VA hospital has history of withholding info](#) (30 June, Andy Marso, 164k uvm; Kansas City, MO)

The leader of the Kansas City VA Medical Center has been under fire for withholding information about a patient's death, allegedly at the hands of Veterans Affairs Police.

That secrecy seems to be a pattern.

Years earlier, that leader, Kathleen Fogarty, was also accused of cover-ups at her previous job as head of a Tampa, Florida, VA hospital.

A patient's daughter there dubbed her "the VA queen of cover-ups" in 2014, after Fogarty authorized staff to install a hidden camera in the patient's room. Fogarty was also accused of cutting veterans' access to care outside the VA system to save money and denying she was doing it.

The incidents raise new questions about her administration's handling of the death of Dale Farhner in Kansas City.

Farhner, a 66-year-old veteran from Kingston, Missouri, had hernia surgery at the Kansas City VA hospital in May 2018. The surgical wound became infected, and he was driving himself to the hospital's emergency room three days later when a VA police officer confronted him for driving the wrong way in the parking lot. The ensuing altercation left Farhner nearly comatose, according to internal VA documents leaked to USA Today. He died two days later, but the documents reportedly made no determination about whether his death was due to injuries inflicted by VA Police.

The Star learned about Farhner's death last year through an anonymous tip and filed a Freedom of Information Act request that revealed that the VA has documents, audio and video related to the incident. But the VA has repeatedly refused to provide them — or any other any information about the incident — to The Star, to members of Congress and even to Farhner's family, which has since filed a wrongful death lawsuit against the agency.

Randall Barnett, the president of Vietnam Veterans of America's Kansas City branch, has said it smacks of another cover-up.

"If they weren't at fault or didn't feel through their investigation they were somewhat at fault, why would they cover everything up?" Barnett asked. "Or try to cover everything up?"

The Star asked to talk to Fogarty this past week about her time in Tampa and the Farhner incident, but Kansas City VA spokesman Vernon Stewart provided only written responses via email.

"Federal law enforcement officials have already fully investigated this matter and determined that VA acted appropriately in its interaction with the veteran," Stewart said. "VA will cooperate fully with any additional official investigations."

HIDDEN CAMERA

According to an interview she gave with a Florida public radio station in 2015, Fogarty started her career as a dietitian at the Kansas City VA in 1986.

She rose through the ranks over several decades and in 2011 became director of the James A. Haley VA Medical Center in Tampa — one of the nation's largest VA hospitals.

The hidden camera controversy struck soon after.

The incident centered on Joseph Carnegie, a 79-year-old Korean War vet with severe brain damage.

According to an investigation by the VA's inspector general — the agency's internal watchdog — Carnegie's nearly 400-day stay in the hospital was marked by tension. His family repeatedly accused the staff of poor care, and staff members increasingly suspected his relatives were sabotaging his care to set them up.

VA supervisors began discussing whether to hide a camera in the room — a question that eventually was elevated all the way to the executive level. According to meeting notes

uncovered by the inspector general, there was disagreement among the hospital's leaders, until Fogarty herself authorized it.

Carnegie's relatives thought the new smoke detector in his room looked a little odd, and a maintenance man confirmed there was a camera in it. That set off a public controversy first reported by the Tampa Bay Times that drew the attention of then-U.S. Sen. Bill Nelson, who requested the inspector general's investigation.

The inspector general determined that the use of a hidden camera outside of a formal law enforcement investigation was very unusual at the VA, but in this case it was done out of legitimate concerns for patient safety.

"VA's inspector general thoroughly reviewed this nearly seven-year-old matter, determining that 'the patient received extensive, even exhaustive, high-quality care at (the Tampa VA Medical Center) ... the patient's family was aware of the (camera) when it was activated and began to record video images,' and that use of the camera was 'reasonable,'" Stewart, the Kansas City VA spokesman, said.

The Tampa Bay Times, however, found that in the aftermath of the camera's discovery, hospital staff working under Fogarty untruthfully said that the camera was never intended to be hidden (internal memos showed it was), it was not recording (the investigation turned up 43 days worth of video) and that the family knew about the camera and signed a release authorizing it (it hadn't).

In an editorial, the newspaper said Fogarty was responsible for "the hospital's culture of defiance and non-responsiveness to public concerns."

When Fogarty was tapped to temporarily take over the VA's troubled Southwest region in 2014 amid a crisis over falsified patient wait times, Carnegie's daughter told The Arizona Republic she was "disgusted."

"To send the VA queen of cover-ups to Phoenix — it's just a spit in our face," said Natalie Carnegie, who could not be reached for comment for this story.

BUDGET BALANCING

In the radio interview, Fogarty said she had no regrets about the hidden camera because "the decision was made for the safety of that patient." But she also said that if faced with a similar situation she would use an overt camera, not a hidden one.

In 2015 Fogarty took the job as director of the Kansas City VA Medical Center, which she described as a homecoming and a chance to serve at a smaller, less hectic hospital. Her salary — about \$190,000 a year — is roughly the same as what she was making in Tampa Bay.

The following year USA Today included her in a list of VA administrators "transferred to new jobs despite concerns about the care provided to veterans at the facilities they were previously managing."

The news organization cited Tampa Bay Times reporting that showed Fogarty "cut veterans' access to outside care to help overcome a multimillion-dollar deficit as director of the Tampa, Fla., VA, in 2011 and repeatedly denied publicly that she was doing it."

Stewart said USA Today's story was "flat-out false and repeating it to your readers would be irresponsible."

"When Director Fogarty became director of the Tampa VA Medical Center in 2011, she inherited a nearly \$48 million budget deficit," Stewart said. "She balanced the budget by using commonsense management principles such as not filling unneeded positions and eliminating unnecessary overtime and travel. Under Fogarty's leadership, the facility expanded its services to Veterans, and the blueprint she developed for managing the resources remains in place at the VAMC today."

That's not what she told the Arizona Republic.

"In her interview last week, Fogarty said she balanced the Tampa VA budget in three years by reducing the time veterans spent in non-VA hospitals," the newspaper wrote in an article published Nov. 27, 2014.

At least one VA spokeswoman who worked under Fogarty at the Tampa VA denied in 2011 that there even was a deficit — a claim the St. Petersburg Times wrote was "contradicted by the facility's own budget records."

The Farhners' lawsuit is still in its early stages. Their Kansas City attorney, James LaSalle, said the VA had not released any information to the family in response to an administrative complaint they had to file before they could sue.

The agency also has not provided information about what happened between Farhner and police to former U.S. Sen. Claire McCaskill and current U.S. Sen. Roy Blunt, who both requested it.

LaSalle said the VA could be forced to hand over the investigative documents revealed by The Star's records request during the suit's discovery phase, but he had no timeline for when that might happen.

"I know that once it moves to litigation," LaSalle said, "that stuff is evidence at this point."

[Back to Top](#)

2. Improving Customer Service

2.1 - Forbes: Veterans Affairs Approves 'Ketamine-Like' Drug Despite Cost, Doctors' Misgivings (30 June, Janet Burns, 34.3M uvm; New York, NY)

In June, the Department of Veterans Affairs chose to approve the use of a new, expensive anti-depressant despite concerns about the drug's effectiveness, and a backdrop of political speculation about the president's involvement.

The drug, called esketamine (brand-name Spravato), is intended to offer the same kind of effects as a mental health tool that ketamine, a popular recreational drug, veterinary anesthetic, and "darling of combat medics," has been found to offer in clinical studies.

However, recent reporting by Kaiser Health News and others have raised some serious concerns about the drug's adoption, including its effectiveness, its risks, and even its FDA approval process. KHN explained:

The FDA, under political pressure to rapidly greenlight drugs that treat life-threatening conditions, approved it anyway. And, though Spravato's appearance on the market was greeted with public applause, some deep misgivings were expressed at its day-long review meeting and in the agency's own briefing materials, according to public recordings, documents and interviews with participants, KHN found.

Dr. Jess Fiedorowicz, director of the Mood Disorders Center at the University of Iowa and a member of the FDA advisory committee that reviewed the drug, described its benefit as "almost certainly exaggerated" after hearing the evidence.

As the New York Times reported last month, questions have also been raised about President Trump's involvement in the drug's speedy adoption and approval:

The decision to endorse the drug — called Spravato, and manufactured by Janssen, a unit of Johnson & Johnson — came days after President Trump offered to negotiate a deal between the drug maker and the agency. Johnson & Johnson reportedly was working with associates at Trump's Mar-a-Lago club, and the company has been supporting V.A. suicide-prevention efforts.

A spokesman for the V.A. said that the decision to approve the drug, which would cover its use by doctors in its nearly 1,000 clinics nationwide, was a medical one. In a statement, the agency said, "V.A. will closely monitor the use of esketamine"

According to The Guardian, one estimate puts Spravato's potential earnings for Johnson & Johnson at around \$600 million by 2022.

[Back to Top](#)

2.2 - U.S. News & World Report (AP): [Cicilline Plans Event for Vets With Veterans' Committee Head](#) (30 June, 12.3M uvm; Washington, DC)

PAWTUCKET, R.I. (AP) — U.S. Rep. David Cicilline is planning a barbecue for veterans with the head of the House Veterans' Affairs Committee.

The Rhode Island Democrat announced Thursday that he's holding a community conversation and barbeque at the Slater Memorial Park pavilion in Pawtucket.

House Veterans' Affairs Committee Chairman Mark Takano, a California Democrat, plans to attend the July 14 event. It begins at noon.

The committee has jurisdiction over legislation for veterans' health care, benefits and other issues.

The event is free and open to Rhode Island veterans and their families. Cicilline asks that attendees RSVP with his Pawtucket office.

Representatives from the U.S. Department of Veterans Affairs, Rhode Island National Guard and Rhode Island Office of Veterans Affairs will be there to provide information about resources available to local veterans.

[Back to Top](#)

2.3 - WBKO (ABC-13, Video): [June is PTSD Awareness Month, local veteran shares his battle](#) (30 June, Allie Hennard, 46k uvm; Bowling Green, KY)

June is PTSD Awareness Month and one local veteran has shared his story to in hopes of bringing awareness year-round.

About 11-20 out of every 100 veterans who served in the Iraq or Afghanistan wars will suffer from post-traumatic stress disorder in a given year, according to the National Center for PTSD.

"I started out wanting to go into the military because pretty much my whole family was in it," said local U.S Army Veteran Brian Frogge.

For many soldiers, it's a family tradition to join the military.

"I was deployed three times," Frogge said. "While over there is when 9/11 happened. It was just a bad night."

Post-traumatic stress disorder is a mental health problem that some people develop after experiencing or witnessing a life-threatening event.

"You're not expecting all of this stuff to happen like bullets flying around, waking up in the morning having mortars flying over your head hoping and praying that not one of them is going to land close to you," said Frogge.

"When they fired the first missile into Kuwait, it went over my head," he added.

Frogge said he has suffered nightmares, irritability, anger problems, and blackouts.

"I could get upset and I'd have blackouts and I'd walk away and disappear for anywhere from 30- minutes to an hour," he said.

He said his family has seen him at his worst, but have helped him through.

"People don't see behind the curtain so to say, the things that they go through," said Brian Frogge Jr., Brian's son.

Frogge said there is always someone out there to reach out to for help, like the VA Clinic in Bowling Green or fellow veterans.

"He's been going through therapy and he's grown so much from it," his son said.

Since seeing a therapist, Frogge says he doesn't have near as many symptoms.

"Anger issues, I've been able to control those better. The blackouts, I haven't had one in over a year now," Frogge said.

"He's most definitely my hero, I really look up to him," said his son.

"There's help, there's always help," Frogge said.

The VA Clinic in Bowling Green is a local resource available for veterans as well as the veterans crisis line at 1-800-273-8255.

[Back to Top](#)

2.4 - The Gainesville Times: [Sam Walley's journey through war, wounds and recovery](#) (28 June, Nick Bowman, 27k uvm; Gainesville, GA)

Samuel Walley's mind was clear as the blast separated the soldier from the earth and two of his limbs, lifting him 20 feet on a cloud of dust and adrenaline and death.

He's younger than he looks, leaning forward over a coffee table in the over-air-conditioned lobby of the Martha T. Nesbitt Academic Building at the University of North Georgia Gainesville campus. Covered in tattoos but holding onto the clean-cut military haircut, he navigates life using a prosthetic leg and a head full of experience and memories that most 26-year-olds in Gainesville are blessed to be without.

He's the son of a construction worker father, Kelly Walley, and a mother, Connie Walley, who in his early life worked cleaning churches but now works with Project ADAM, a drug-rehab ministry in his hometown.

He's a former soldier of the 82nd Airborne Division and was very close to being killed while deployed to the Zhari district near Kandahar in southern Afghanistan.

These days, he's a student of political science at UNG with hopes of getting into politics to help make life a little easier for veterans. He's lived in Gainesville since leaving the Army in 2014.

"He's been very instrumental in all of our fundraiser events, and he's been a big supporter of For The Warriors Foundation," said Mike Seely, a retired airman and former brigadier general in the Georgia National Guard. "I can't say enough about him. He's been very energetic, very dedicated."

Most of all, Walley's recovered — from his wounds, from the nightmares that followed him home from Afghanistan, from the deaths and suicides of his former squad mates who returned stateside and, for one reason or another, couldn't find their own recovery.

"These are the guys you have to turn back to. You have the biggest commonality with them," Walley said, describing bonds that form tighter than family in the midst of firefights, bomb sweeps and patrol after patrol.

His connection to his fellow soldiers was forged tight in the stress of war: Killing, seeing friends be killed and navigating through a prolonged war in rural Afghanistan.

"When you get out, everybody is going to deal with their demons whether it's 7 weeks after returning stateside or its 20, 30 years down the road," Walley said.

He paused, and then added: "We've lost four guys in my platoon stateside."

'I wanted to be in the fight'

Walley was born June 4, 1993. He attended County Line Elementary, Russell Middle and Winder High School. He graduated in 2010.

He always wanted to be in the military, though didn't know what branch. For about a decade he aimed for the Marine Corps, but his time in Junior Reserve Officer Training Corps in high school taught him that he'd be more at home following his father, who served as a combat engineer, into the Army.

Looking at early enlistment as an upperclassman at Winder High, his choices of role in the Army were whittled down to four: infantry, supply, truck driver, combat journalist.

"My mom wanted me to be a combat journalist," Walley said, chuckling, "but there's no way I was about to go get shot at and not have a firearm to shoot back."

He wanted a combat role — wanted to "be in the fight somehow," he added. "The best way to do it was infantry. So I picked infantry."

He wanted not just to serve but to fight because of 9/11. Though he was just a fourth grader, he remembers the "absolute chaos" of the day terrorists flew two jets into the World Trade Center, killing 2,977, and a third into the Pentagon, killing 125.

"I remember talking to my parents later that day, starting to understand what just happened," Walley said, thinking back to 2001, "but you're still a kid. I don't think I started to fully understand the concept of America being attacked until probably high school."

Young children don't think much of the world beyond the confines of their neighborhoods, he said. Your parents know it all, the world works in a fixed, routine way and the bad guys out there are relegated to bedtime frights and TV.

But Walley got older, and he learned what being attacked meant for a nation that went from enjoying the Peace Dividend to being the victim of the deadliest terrorist attack on the planet.

"You learn that you're not the only one in this world," he said.

Ready for war

The food was good in Kyrgyzstan, one of the stops along the way from Fort Bragg to the Kandahar Airfield in southern Afghanistan.

Eating, waiting and sitting through briefing after briefing — jokes about Microsoft PowerPoint forever rumble through the ranks of the Army — punctuated Walley's days between February and March 2012.

But into March, he was in the thick of Operation Enduring Freedom, leaving the huge airfield for a tiny station at Pan Kalay. On the way, he would get his first taste of combat in the form of a few tiny tinkling sounds while on board a Chinook bound for the outpost.

"We got shot at by a guy in the middle of the desert. He was shooting at us with an AK. That guy, they lit him up. He was dust. He was nothing," Walley said. "That's when it hit me. All I heard was like little tinks, that's it. But after you look out in the field and see this guy and see him get disintegrated, you realize, 'Oh. This is real. This is no longer on paper. This is no longer a game. This is real s--t.'"

He would first enter combat while on patrol at Pan Kalay, a station of about 100 American soldiers and members of Afghanistan's national army.

"I can't really remember times where we went outside the wire and didn't get in a firefight," he said. "The way we did our rotation was three days on, three days off. We would have three days of going on patrol, and those first three patrols — those stuck out to me the most.

"After that, you forget what number it is. It just all starts to become a big blur."

Zhari

Walley lost his right leg, his left arm and almost his life because of a bicycle.

June 6, 2012, started as a normal day — or a routine day, as there wasn't much normal to go around for soldiers in the Zhari district near Kandahar.

Unlike Pan Kalay, Zhari was just a checkpoint not much larger than a football field. It was home to about 30 soldiers.

Two days before — Walley's 19th birthday — a higher-up in the Taliban had been captured by his platoon within the 82nd Airborne Division. Agitated by the loss, the terrorist group was expected to step up activity in the region.

"(We were) going out, going to observe new areas, looking for IED caches, weapon caches, just really getting to know the terrain like it's the back of your hand," Walley said. "We just call it presence patrols, going out and showing face."

Navigating new territory in Afghanistan is a stressful, slow process. And out front goes the mine sweeper.

He's "worried about looking at the ground checking for IEDs, that's their job," Walley said. "There's a guy behind him, the team leader ... that would clear the ground with poker chips. You know if you need to move in and out of an area, you go along the poker chips because you're not going to step near an IED."

On June 6, Walley's platoon pushed to the north of the compound where the Taliban commander had been captured, crawling over grape rows in the countryside when they happened upon a group of four men in what had been established by U.S. forces as a kill zone.

"We pop up out of the grape row and start questioning them. One guy takes off on a bike," Walley said. "I just spoke a little, tiny amount of Poshtun — enough to yell at people and get by. You could tell they were lying."

Through a translator, the men were told to clear the area or potentially be killed if they were seen again.

The man on the bike

"Now, we're worried on this guy on the bike that had just taken off," he said.

The soldiers followed his trail to a two-story structure with bars on the windows, an unusual find for that area of rural Afghanistan.

"It was an L-shaped compound. It was two floors. To get up to the top floor, there was a hill," Walley said. "That's where the road was. What we were going to do to get this guy on the bike was get one team on one side of the road and wait for another team on the other side of the road."

They called in a helicopter that would cut off the man fleeing on his bicycle and, hopefully, flush him back toward the waiting soldiers. In the meantime, they cleared the structure and found a dull knife and burn marks on the floor — clear signs that IEDs were being made in the building.

"All my Spidey senses are going off. Something is wrong," he said.

Others in his platoon searching the structure had just passed into the main chamber, the longest room of the L-shaped structure.

"I look in the door, the long part of the L they just went into, and there's a wire hanging out of the wall," he said. "Nobody had noticed it. My heart sank — at that point, you feel like puking."

There was a bomb planted somewhere in the building.

His team rushed out of the compound. At the same time, they got word the helicopter they called in cut off their target on the bicycle early and they had only a few minutes to prepare to snatch him on his way back.

All the while, they didn't know where the IED was.

With no time to set up an ambush for their target on the roadway, Walley looked for the signal from his leader to improvise.

"With that amount of time, you had literally seconds to react," he said. "I remember hearing the bike, and I just looked across at my squad leader. All he did was nod at me. There was no time."

A capture, at this point, felt out of the question. There was too much at risk — a bomb in the area, no time to prepare for a transport and enemy fighters likely in the area.

"I'll be God honest, in my head I was just going to shoot him," he said. "If something goes bad, it could go really bad and it could be all three of our lives done."

After the signal from his leader, Walley cut wide on the building, doing his best to avoid the edges of the structure where insurgents were known to plant IEDs. He rounded the corner to catch the target as he followed the road down its descent from the top of the structure to the bottom.

Adrenaline pumping, heart in his throat, Walley lifted his weapon, ready to track the target as he rounded the road.

He felt heat, and a short moment later a weightlessness. His mouth was filled with dirt, and he attempted to stand but couldn't figure out why his legs weren't supporting him or his arms lifting him.

His medic pulled him from the dust cloud, which the rest of the soldiers back at the Zhari checkpoint saw rise into the sky. Walley's right leg was severed above the knee, his left arm wrecked and dangling. Shrapnel pocked his left leg, but it remained intact.

"(The insurgents) ended up detonating the IED off to the right of me — right beside this trail that we all just walked in on," he said. "Nobody picked up the IED."

In the aftermath of the blast, someone managed to grab the man on the bike. He was "bagged and tagged," Walley said, and carted off to who-knows-where. The soldier never learned who he was.

Walley was medevaced and on the operating table in fewer than 20 minutes. He held it together and didn't go into shock until the field surgeon removed what remained of his left arm and placed it in a little garbage bag with a biohazard symbol on it.

He would have nightmares about that moment for years.

Post-traumatic stress

"When I first met him, it's been over 3-and-a-half years, some of that was affecting him a lot," said Mike Seely, discussing Walley's wounds both external and internal.

He had been through dozens of surgeries at a Veterans Affairs hospital in Washington, D.C. In that time, he was visited by President Barack Obama, senators, congressmen, professional athletes, leaders of veterans groups and advocates — most of them just wanting to express their thanks, some looking for an easy photo-op with a wounded vet.

He didn't walk again until 2013. When he was discharged from the medical center, he was overweight from months of being bound to a wheelchair.

"Even though I could walk in the summer of 2013, I don't think I got (back to normal) until probably a little over a year ago," he said.

With limited movement and a lot of pain, Walley started another fight stateside, this one against bad dreams, isolation and anger.

"The military is really great on taking a civilian and converting them into a killing machine," Seely said. "The one thing they're not good at is converting them from a killing machine to a productive member of society."

Those early years of civilian life weren't good ones for Walley, who tried to treat his ailments with the usual salves: Alcohol, misbehavior, resentment.

"His attitude wasn't a good one," Seely said. "The Sam that I knew when I first met and the Sam that I know today you'd say are two different people. He's grown a lot in the past almost four years."

Through the work of veterans groups, especially Seely's own For The Warriors Foundation, the soldier was able to turn his life around through "exposure to another element," Seely said.

He enrolled at UNG, got back into a gym routine and now practices Jiu Jitsu — each new step breaking down walls vets struggling through PTSD erect around themselves.

But they haven't come down easy.

He's been a student at UNG for most of the past four years but is just now making real progress with his education. Initially, he was in so much pain from walking the campus that he couldn't manage his schedule.

And then, the past few years have been punctuated by the stateside suicides of soldiers in his old platoon.

"Unfortunately, it's almost separated my platoon a little bit," Walley said. "We all came together when it would happen, but some guys would slowly distance themselves just because of the pain it caused a lot of us."

A new way

The 26-year-old soldier has held himself together both by being helped and helping others. Emerging from isolation, Walley is now an involved member of three organizations: For The Warriors Foundation, the local American Legion Post 7 in Gainesville and the PTSD Foundation of America.

For The Warriors is focused on reintegrating vets back into daily life — helping them form connections that keep them out in the community in order to "fully integrate back into society and live a rewarding, fulfilling and productive life," according to its mission statement.

This comes in the form of golf tournaments, networking events and other activities.

And then there's the American Legion, long run by veterans of the Vietnam War, the last war in which men were drafted and the last mass-service war in the nation's history.

Walley has been a member of the Legion since he left the Army, but in recent months has worked to bring younger veterans into the organization.

"If they don't have new people coming in the bottom, they're not going to survive," said Seely, himself a Vietnam veteran. "What Sam is doing is very perceptive, very proactive."

In mid-June, Walley helped organize an open house at Post 7 specifically to recruit post-Vietnam vets.

"I really want to start getting these Gulf War, (Operation Iraqi Freedom) — getting these guys into these board positions. I simply came out and started trying to get these guys together," he said. "I don't really care to be in a leadership role or anything, I just knew that I knew a lot of people."

His efforts are aimed at helping veterans forge connections with one another and the community at large.

"A lot of these guys aren't encouraged to evolve from their past experiences into their new experiences, their new world," Seely said. "If you don't have exposure to healthy, happy lifestyles and you see what the alternative is to isolationism, you're not going to grow. A lot of these guys who have committed suicide, it's tragic when you look at what could have been done to prevent that."

For the worst cases, the PTSD Foundation is one of the groups working to fill that void.

It handles "more of the nitty-gritty stuff," Walley said. "That's (for) the veterans who are in dark areas. Helping them, sometimes we'll have to go to the Salvation Army to see if there are vets in there."

The foundation runs an intensive camp, similar to a boot camp, in Houston, Texas, where veterans are broken down and, instead of being turned into soldiers, are turned back into citizens.

Despite the wedges of suicide pushed between the fellow soldiers in his platoon, Walley's connections to his friends remains strong. He knew, he said, that he could pull his phone out of his pocket and dial any of them — just to talk, to vent, to ask for help.

He recalled his time in the VA hospital in Washington, when a fellow soldier was hassling a down-and-out Walley to get to work on his PT.

"My old squad leader used to give me crap in the hospital because he's a quad-amputee, and he's walking around," Walley said, laughing. "He'd always tell me, 'Walley, you need to get to walkin'.'"

His interview with The Times was scheduled after he finished with classes for the day. Toward the end of the talk, Walley's girlfriend sat down with him. They talked about their plans for the evening, about whether he was going to head to the gym and what they might do for dinner that night.

Seven years after a terrorist flipped the switch that almost ended his life, Walley is walking just fine.

[Back to Top](#)

3. [Business Transformation](#)

4. [DOD Cooperation / Electronic Health Records / MISSION Act Implementation](#)

5. [Suicide Prevention](#)

5.1 - Times Record: [Community Matters: Unlocking the veteran suicide crisis](#) (30 June, Sen. John Boozman (R-Ark.), 15k uvm; Fort Smith, AR)

A retired colonel in the Arkansas National Guard recently shared his frustration with missing the signs of mental health struggles among a former soldier under his command. Similar tragedies are happening daily across the country, but veterans — who represent about eight percent of Arkansas's population — are particularly vulnerable. Sadly, they account for about 20 percent of suicides in our state. This is why we are working to fully understand the risk factors associated with suicide among veterans and to improve coordination of veteran mental health and suicide prevention services to change this tragic statistic.

Congress has taken steps to improve access and treatment for veterans at risk of suicide. That includes significant funding increases to the Department of Veterans Affairs to decrease veteran suicide rates. In Fiscal Year 2010, the VA requested \$62 million for suicide prevention outreach. That number nearly quadrupled to \$222 million within 10 years. Despite the sharp increase in resources, 20 veterans commit suicide each day. That number has unfortunately remained roughly unchanged. Only six of those 20 veterans are receiving healthcare services at the VA. This points to a significant need to empower the VA to work through community partners to expand outreach.

National data indicate that more than 50,000 organizations provide suicide prevention services for veterans, yet they are hard for veterans to find, access, apply for and use. The VA and these organizations share a common goal of saving the lives of veterans, but lack the framework and authority to coordinate their efforts.

That's why I'm pushing the VA to improve information sharing between the department and veteran-serving nonprofits. I recently partnered with Senator Mark Warner (D-VA) to introduce legislation that would enable the VA to harness the potential of what is already occurring in communities by allowing it to provide grant funding to nonprofits and local organizations for expanded outreach to veterans. The IMPROVE Wellbeing for Veterans Act enhances coordination and planning of veteran mental health and suicide prevention services and would better measure the effectiveness of these programs in order to reduce the alarming number of veteran suicides.

The VA has a real opportunity to work with its partners to develop a tool that can be used to measure not just what services were made available to a veteran, but the effectiveness of the programs. As I talk with veteran-serving groups that provide suicide prevention assistance, I am more convinced that we can work together to create and use a standard measurement tool that helps us in this area. Some nonprofit groups have implemented their own tools to track progress and monitor the results of their veteran suicide prevention programs. The VA should examine how it can work with partners to develop or adopt a measurement tool that would be used uniformly across all groups. This will allow the VA and its partners to identify which suicide prevention efforts are having the most impact so that resources can be concentrated effectively.

The legislation has been well-received. VA Secretary Robert Wilkie expressed his support for our bill, calling it "key" to unlocking the veteran suicide crisis. Representatives Jack Bergman, R-Mich., and Chrissy Houlahan, D-Pa., introduced companion legislation in the House of Representatives. We must continue this momentum.

Empowering veteran-serving nonprofits in addition to state and local organizations to work together in the fight against veteran suicide will ensure that we reach more veterans with more effective services so that we can break the trend of veteran suicide.

Sen. John Boozman, R-Ark., has represented Arkansas in the U.S. Senate since 2011.

[Back to Top](#)

6. Women Veterans / Homelessness / Benefits / Cemeteries

6.1 - WSOC (ABC-9, Atlanta Journal-Constitution): [Community comes together to help 99-year-old World War II veteran facing eviction](#) (30 June, Jeremy Turley, 327k uvm; Charlotte, NC)

FORSYTH COUNTY, Ga. - Even though they are usually not the type of people to ask for help, Marian Rytkenen and her family needed a hand.

The 99-year-old World War II veteran was facing eviction from her nursing home after a trusted caretaker allegedly embezzled her life savings and payments she should have gotten from the Department of Veterans Affairs were stuck in bureaucratic limbo.

After connecting with Rytkenen's son via Facebook about a month ago, the Cumming-based Shadow Warrior Foundation and its president, Ryan Hepworth, felt they had to answer the family's call for help.

"Typically, veterans like her from the 'greatest generation' don't have to deal with this," Hepworth said. "She fell through the cracks."

During the war, Rytkenen served as a recruiter until 1945, when her husband's plane was shot down in France, Hepworth said. While her husband managed to survive the war, he was injured, and Rytkenen left the service to care for him.

Seventy-five years later, with her savings gone, Rytkenen tried to collect the VA benefits she never knew she was owed. They would have paid for her to remain in The Oaks nursing home in Cumming.

But more than eight months after Rytkenen applied for the benefits, Hepworth said the veteran still had not received any aid from the federal agency.

With a looming eviction date of July 15, Hepworth's organization and state Sen. Greg Dolezal, R-Cumming, banded together to create a Facebook fundraiser that would pay Rytkenen's living expenses until the VA benefits kick in.

Dolezal's post in the Focus on Forsyth County Ga. group generated more than \$3,000 in the first hour and more than \$9,000 overall. The lawmaker said the large number of donors, 196 in all, reveals the true generosity of his community.

"We all collectively remember D-Day and World War II. I've been reading about it lately and what the 'greatest generation' did for us," Dolezal said. "Generosity is a natural response to gratitude, and I think this reflects the gratitude we felt remembering D-Day" earlier this month.

The money raised will go directly to pay for Rytkenen's living expenses and should keep her at the nursing home for at least another two months, Hepworth said.

In the meantime, the organization and U.S. Rep. Rob Woodall, R-Lawrenceville, are working to expedite Rytkenon's benefits.

Both Hepworth and Dolezal said the veteran and her family were not the type of people to ask for help, but the dire situation called for it.

"I was beautifully stunned by the response. I thought it was audacious to do this for a person we had never met," Dolezal said. "This bridged all of the differences we may have."

[Back to Top](#)

6.2 - Staten Island Advance: [Smart home will be a life changer for veteran who changes lives](#) (30 June, Ann Marie Barron, 161k uvm; Staten Island, NY)

Michael Sulsona can reach deep into a broken war veteran's heart and find strength, determination and hope.

But reach the top shelf in a kitchen cabinet? That's been a challenge for the retired Marine Corps sergeant ever since the day he lost both of his legs to a land mine while serving in central Vietnam.

"At 67, I'm with the broomstick, trying to move things to the edge," Sulsona says with a laugh and an expletive, mocking his stubborn attempt at independence. He shares experiences like this, and encouragement, with veterans daily in his dual roles as a Marine Corps League service officer and an ambassador for the Stephen Siller Tunnel to Towers Foundation.

The cabinet reach, and most other everyday tasks, have been tough for Sulsona ever since that fateful day in 1971. Yet, on a daily basis, he counts on those experiences to guide and assist veterans facing similar challenges.

On July 2, he'll be on the receiving end of that particular brand of generosity when he and his wife, Frieda, are presented with a new, mortgage-free, entirely accessible smart home, courtesy of the Stephen Siller Tunnel to Towers Foundation.

The two-story New Dorp home features everything from widened doorways and a roll-in shower, to an elevator and motorized stovetop and kitchen cabinet shelves that drop down to his level for easier access.

It'll be a life-changer, he says.

"This is going to add years to my life," said Sulsona, who in recent months hasn't been able to access his second-floor bedroom in his Bulls Head townhouse because a poorly-designed chair lift and a shoulder injury have made it too difficult to board.

"I'll be able to live more productively," he said. "I'll be able to sleep in a bed."

It'll be the fourth home provided on Staten Island by the foundation, started by Frank Siller and his siblings in memory of their brother, Stephen, an off-duty New York City firefighter who was killed while responding to the World Trade Center on 9/11.

'YOUNGER GUYS LOOK UP TO HIM'

Sulsona's tough-as-nails persona, coupled with an intimate knowledge of the ins and outs of Veteran's Administration (VA) red tape, are what make him a priceless addition to the foundation, said John Ponte, the senior director of its Gold Star Family Home and Smart Home Program.

"He lives in that world," said Ponte. "He's been very, very positive, and the younger guys look up to him. They call him grandpa. He's just a wealth of knowledge."

Securing the services and support the VA provides involves a certain skill set, Ponte said. It's one Sulsona has mastered through the decades. "A lot of kids say, 'the VA doesn't do this for me, doesn't do that for me,' but there's a lot of self-initiative needed."

He doesn't coddle the vets he sets out to help, Ponte said. "He barks at them. He gets them moving. And there are times when he's screaming at the VA. It's his determination that makes it happen."

Over the past few years, his volunteer efforts haven't always been convenient -- or even safe. Some of his time is spent in offices opposite members of Congress, or addressing sponsors at fundraising dinners. Yet, reaching out directly to homeless veterans is often a bit less glamorous. Desolate subway stations. Cold, dark alleys. An emergency room on Christmas Eve. He's seen them all in his efforts to "build a bridge between vets and the VA."

"He gets in the car, no matter what time of day," Ponte said. "I tell him he's got to slow down a bit. When you see these cases and you listen to these people's problems, it affects you. It brings you down, too."

From social worker, to claims specialist and psychologist, to just an ear, listening on the other end of the telephone line -- Sulsona plays every role.

HIS DEDICATION AND A SPECIAL CHRISTMAS

He dropped everything in 2018 to head to Harlem at 2 a.m. and spent Christmas Eve in an emergency room, using diplomacy and a bit of grit to secure prescription medication for a homeless vet. Later, at a diner, he ate steak and eggs with the vet. It's one Christmas he'll always remember, he says.

He recalls his own return home from Vietnam, and a less-than-gracious welcome from his home community in downtown Brooklyn.

"I was asked not to vote," he said. "I was told to move my car (for parking too close to someone's driveway). My car was being keyed. These were my neighbors. I had artificial legs and I was parking blocks away."

Bitterness, by all accounts, has had no place in his life. "That was just the way things were," Sulsona says.

Rather than waste time on anger, he took his positive outlook to college, graduating with honors from Goddard College with an MFA in creative writing, then went on to write more than 23 plays, 18 screenplays and a handful of books as an untitled (ghost) writer.

He's grateful to Frank Siller for his example, and for allowing him to reach other veterans, he says. The rewards far outweigh anything he ever got from writing scripts, he says.

"Here, I actually touch somebody," he said. "You can help them make it to the next day. When you get that one person that no one cares about, and you change his life . . . What I've been exposed to is priceless. You can't buy it."

"Everything that I wanted to do in life, every dream that I had, the Siller Foundation has shown me that it's possible," Sulsona said. "They've changed my whole life by just showing me what I could do and allowing me to do it."

TRIBUTE TO SILLER

Siller's passion is unmatched, Sulsona said.

"If you cut Frank loose, he'd personally take care of every single first responder," Sulsona said. "And, he just about does."

He laughs that he made news for not being bitter with the VA, remembering a letter he wrote to the Advance five years ago when three Lowe's employees took it upon themselves to repair his broken wheelchair in the store after he'd waited many long months for a new one.

"The story went viral because I wasn't trashing anyone," he said with a chuckle. The incident led him to his Tunnel to Towers career, he said.

Ponte spotted the article and set out to give Sulsona a wheelchair the foundation had available. When Lowe's wouldn't provide Sulsona's contact information, he was briefly disheartened, only to spot Sulsona a few minutes later on the drive home.

"I just happened to glance out the window and I see this guy, rolling in a wheelchair," Ponte recalls. "I got so excited." After chatting with Sulsona for nearly an hour, and inviting him back to his home for a barbecue, he knew the Purple Heart, Bronze Star With Valor veteran could provide a great service to the Tunnel to Towers Foundation. Frank Siller was easily convinced, he recalled.

Sulsona never had a thought of getting anything for himself from the foundation, he said. His townhouse has been modified through the years and he'd gotten used to things the way they were.

Besides, the foundation's mission was to provide services to 9/11 families and veterans from the wars in Afghanistan and Iraq, not Vietnam.

That changed at a Veteran's Day event a few years back, when Fire Commissioner Sal Cassano asked Ponte, "Why aren't we building Mike a house?"

After about two years of battling New York City bureaucracy, that plan is coming to fruition.

Sulsona's house, at 52 DiMarco Place, will be unveiled to him and dedicated on July 2 at 11 a.m. in a ceremony open to the public.

Sulsona says the home will change everything.

"Considering the life that we've lived, for this to happen to both of us, we're still shaking our heads," he said.

He's seen a few smart homes before, but has not yet seen this one.

"You're able to move freely," he said. "You just roll into the house. There's actually room between the couch and loveseat. In the dining room, you can sit at any place. That's something I've never lived with."

The only downside to the new home, he says, is that he'll soon have access to the laundry room -- and his wife will expect him to pitch in with those chores.

"Thank you, Frank Siller," he says, sarcastically. "Thank you for that."

[Back to Top](#)

6.3 - The Topeka Capital-Journal: [Harry Colmery's niece recalls humility of World War I pilot, GI Bill...](#) (30 June, Tim Carpenter, 62k uvm; Topeka, KS)

Jean Colmery Roberts remembers well the late 1943 visit from her uncle at her apartment outside of Washington, D.C.

Her guest was Harry Colmery, who was weary from a long night composing on Mayflower Hotel stationary a draft of what evolved into the GI Bill of Rights.

"Harry called me after he had written all night for the GI Bill. He told me he used seven pens, I think," said Roberts, 99, and a resident of Charleroi, Pa. "He was tired. He was supposed to go on a fox hunt and didn't want to go, because he was too tired. He didn't want anyone to know where he was, so he stayed with my sister and me."

To mark the 75th anniversary of President Franklin Roosevelt's signing of the landmark law, the University of Pittsburgh documented in words and photographs memories shared by Roberts about her uncle's role in the visionary work supporting veterans.

Colmery, who died in 1979, was born in Braddock, Pa., and served as a first lieutenant and pilot in the U.S. Army Air Service during World War I. He had earned a law degree in 1916 at the University of Pittsburgh and began a legal career that brought him to Topeka in 1920.

He served in 1936 as national commander of the American Legion, which placed him in a position to advocate for veterans. He lived at the Mayflower Hotel in Washington from December 1943 through January 1944 while preparing the final draft of the GI Bill. He was assisted in the effort by American Legion members also eager to help military members reintegrate into society.

The congressional delegation in Kansas has launched a campaign to convince President Donald Trump to award the Presidential Medal of Freedom to Colmery for his role in carving a path for men and women transitioning from military to civilian life.

"As the father of the original GI Bill, Harry Colmery has helped facilitate the education and training of more than 20 million veterans," said U.S. Sen. Jerry Moran, R-Kan.

The Veterans Administration's hospital in Topeka has been named the Colmery-O'Neil VA Medical Center. A statue of Colmery was dedicated in Topeka three years ago.

In Colmery's presence, on June 22, 1944, President Franklin D. Roosevelt signed the GI Bill. An estimated 8 million surviving service members of World War II received educational benefits from what was originally called the Servicemen's Readjustment Act.

The law has been revised to include vocational rehabilitation and employment, home loans and health care benefits. In 2017, Trump signed the Colmery Veterans Educational Assistance Act, also referred to as the Forever GI Bill, to broaden educational elements of the program.

Aryanna Berringer, director of the University of Pittsburgh's Office of Veteran Services, was among veterans who personally drew upon the GI Bill. She grew up in poverty and at times wasn't certain where her next meal might emerge.

"When I joined the military, there was part of me knowing that I can get an education when I got out," said Berringer, an Iraq war veteran. "It's one of those things that can change the trajectory of the life of somebody like me. I was able to break the cycle of poverty, all due to the GI Bill."

Roberts, who was in her mid-20s when visited by Colmery during World War II, said her uncle was dedicated to bettering lives of people around him. She said he was an empathetic man convinced service members must be rewarded for sacrifices made on behalf of the country.

"He cared so much for his fellow man," she said. "He was a bright boy. He was dedicated, a hard worker, a deep thinker and a humble person in many respects."

She said Colmery would likely resist much of the attention he's received around the 75th anniversary of the GI Bill.

"He would be pleased, but he wouldn't want all of this," Roberts said. "He did everything in a very quiet way, and accomplished so much. You never knew what was going on in the background."

[Back to Top](#)

6.4 - Johnson City Press: [Giving credit to those who served in U.S. Nurse Cadet Corps](#)
(30 June, Robert Houk, 33k uvm; Johnson City, TN)

Agnes Lowe is on a mission. The retired nurse is asking Congress to recognize her and other former members of the U.S. Cadet Nurse Corps as veterans of World War II.

She doesn't want proclamations, medals or medical benefits from the U.S. Department of Veterans Affairs. Lowe simply wants nurse cadets given credit for their service to the country with an honorable discharge and veteran burial status.

"We have never been given veteran status," said Lowe, who was among the first to join the Cadet Nurses Corps when it was created in 1943. "We continue to be the only uniformed group that served during the war that has not been called veterans."

Lowe, 93, keeps photos and other memorabilia of her days in the corps in her apartment at Brookdale Senior Living in Johnson City. She speaks fondly of her time in the corps, and is often honored for her service at local events.

She was recently recognized at the Washington County Republican Party's Lincoln Day Dinner in Johnson City, and has been asked to participate in an event on Aug. 31 in Elizabethton to mark the 75th anniversary of D-Day.

"There are so many people who haven't heard of the Cadet Nurses Corps," Lowe said earlier this month. "There are veterans who haven't heard of us. I'm working hard to fix that."

Her friends and employees at Brookdale are lending a hand. Diane Savicky, the resident program director at the facility, said she and others are "doing what we can" to compile petitions to be sent to U.S. Rep. Phil Roe and to U.S. Sens. Lamar Alexander and Marsha Blackburn asking they support HR2056/SR997 granting veteran status to nurse cadets.

Answering The Call

Lowe grew up the youngest of seven children on a farm in Cocke County. One of her siblings was a nurse, and Lowe wanted to follow in her older sister's footsteps.

Many nurses, including Lowe's sister, joined the military during World War II. This created a serious shortage of nurses on the home front.

That's when President Franklin D. Roosevelt formed the U.S. Cadet Nurses Corps. Lowe said she was "one of the 130,000 women who answered the call."

The corps paid cadets \$115 a month to help cover the cost of their uniforms and books, and required participants to enlist in military service once their training was completed.

The last six months of their training were to be spent in an Army or a Veterans Administration hospital. Lowe was among the 30 who chose the Mountain Home VA facility in Johnson City to complete their nursing education. While there she met her first husband, Finley Penick, a Navy veteran.

Senior cadets were responsible for nearly 80 percent of the nursing care delivered on the home front.

Lowe went to Fort Sanders Hospital in Knoxville after her stint at the VA to complete her cadet service. The war ended before her graduation, and Lowe was no longer obligated to join the military.

Lowe continued to work in the nursing profession for more than 40 years. Some of that time was spent as a private duty nurse after her husband was killed in a traffic accident, leaving her with two young children to support.

Lowe later remarried and put her nursing experience to use at the Department of Veterans Affairs Hospital at Mountain Home, where she retired in 1986 after working for 22 years.

Reaching Out To Congress

Lowe has contacted Tennessee's delegation in Congress to ask for their support of legislation to give nurse cadets their due. She said the feedback she's received from their offices has not been as encouraging as she hoped.

"We'll just keep working on it," Lowe said of the bill, noting the American Nurses Association and Veterans of Foreign Wars are two prominent national organizations supporting it.

When reached by the Press, Alexander's office responded the state's senior senator "looks forward to reviewing the legislation" when it clears the Senate Committee on Veterans' Affairs.

Likewise, Blackburn's office stated she also "looks forward to reviewing it in-depth" as a member of the Senate Committee on Veterans' Affairs.

Roe's office released a statement from the 1st District congressman pointing out the U.S. Nurse Cadet Corps "served an incredibly valuable role while World War II was raging on, helping to ensure that U.S.civilian health care needs were met until the war's end."

He also said: "There is a process already established for groups receiving veteran status, and I think that is the proper way for groups to apply for veteran status, Should the majority bring this legislation forward, I look forward to learning more about their eligibility for veteran status."

Roe's office in Kingsport can be reached by phone at 247-8161, or by email by going to his website at roe.house.gov.

Alexander's field office in Blountville can be reached by phone at 325-6240, or by email by going to his website at alexander.senate.gov.

Blackburn's field office in Jonesborough can be reached by phone at 753-4009, or by email by going to her website at blackburn.senate.gov.

[Back to Top](#)

6.5 - Observer-Reporter: [VetFest bring services to Wild Things Park](#) (30 June, Scott Beveridge, 24k uvm; Washington, PA)

Iraq War veteran John Corl said he bounced around homeless shelters until he sought services from the Wounded Warrior Project in Pittsburgh.

The Green Tree man said getting help for his service-related issues brought him to the point where he's now ready to enroll in college and gain employment.

"Wounded Warrior helped me," Corl said Saturday at VetFest at Wild Things Park in North Franklin Township.

He said veterans services "got me back on my feet."

VetFest, a project of Wounded Warrior, brought numerous vendors that offer services to veterans Saturday to Washington County because it is a midway point between Pittsburgh and Wheeling and Morgantown in West Virginia, said Shawn Seguin, an outreach specialist with the project.

"It's an amazing location, Seguin said. "This area loves veterans. They treat them right."

He said about 300 people were expected to visit the festival, where a band performed and vendors reached out to veterans with services ranging from suicide prevention to employers that are hiring.

Representatives from the Veterans Affairs' new outpatient clinic in Washington were there to guide people to local health care so they don't have to find transportation to Pittsburgh.

"We've had quite a few people," said Maureen Griffin, a social worker at the clinic at 95 W. Beau St.

Veterans who are enrolled in the VA can receive a wide range of services in Washington, including suicide prevention, post-traumatic stress treatment and physical examinations.

Saturday's event also included classes where veterans were taught how to prepare résumés and "sell yourself to a company," Seguin said.

He said Pennsylvania has the third highest number of veterans of the National Guard in the nation, and many of them need housing or mental health services.

"We went big," he said.

[Back to Top](#)

6.6 - The Indiana Gazette: [Indiana County VA director set to retire](#) (30 June, Chauncey Ross, 16k uvm; Indiana, PA)

For better and worse, technology and bureaucracy have provided some of the biggest changes in service to American military veterans over the past four decades.

For all the ups and downs assured by 44 years in one job, and for what the cliché of a rollercoaster ride could too easily be applied, heading Indiana County's Veterans Affairs office been a trip that Brenda Stormer said she never wanted to end.

Stormer has six weeks to prepare. She announced her retirement effective Aug. 9 in a resignation notice turned in this past week at the county courthouse.

Gone will be the highs, the victories in getting benefits approved in tough cases for aging soldiers. Gone will be the lows, the times of watching veterans die impoverished while bureaucrats sat on their benefit applications.

The Indiana County Salary Board on Tuesday accepted Stormer's retirement, with regret.

Stormer regrets it too.

Not because of the changes in rules and regulations handed down from Washington that she, and in turn Indiana County's soldiers and sailors, have no choice but to abide.

The camaraderie that drew Stormer to the office in January 1975 and kept her there through the years is what nearly kept her from leaving.

"I'm going to miss this place. I'll miss the people — I love my vets. You build up a relationship through the years with these guys and it's going to be tough. But it's time. It's time."

She has two months to change her mind. But it could be a change that grows on her, like the day when, at age 21, she first walked into the Veterans Affairs office.

"I remember that day. I was so scared!" Stormer said.

She was a clerk. Over 20 some years, she advanced to secretary, then administrative assistant. Over those years, instead of migrating to other opportunities for more money and higher ranks, Stormer stayed on as the ensign to Ronald Buterbaugh, himself a legendary general among courthouse office bosses.

Buterbaugh worked 47 years there, including 41 years as the director.

Stormer took his desk when Buterbaugh retired in 1997.

"Mr. Buterbaugh. That's who my teacher was. That's who I learned from," she said.

Stormer never wore a uniform but had the respect of those who did.

She brought the familiarity of a sister of a national guardsman, the sister of a soldier, the wife of a Vietnam War army veteran.

"I enjoyed working for the vets. The pay has never been great but it's was never about money, it's been about helping people and doing the right thing for people," Stormer said.

Computers and the internet have replaced typewriters and paper since 1975. The Veterans Administration medical centers have gotten bigger, the clinics and transportation programs have improved, she said. And on the whole, at least on paper, veterans have it better today.

"Better than in 1975, I can guarantee you," Stormer said. Medical benefits, claims, money and disability services have all increased.

Stormer relished those changes. But she has anguished, especially in the past two years, over the government's stalling on veterans benefits.

"They're now taking six to eight months to get claims through. We have people dying before their claims go through, especially aid and attendance, widows in nursing homes, veterans in nursing homes," Stormer said. "It is very frustrating. Probably a year ago we were getting these claims back in two to three months. Now it's six to eight months. I can't — it's hard to even deal with."

"It used to be that if someone had a money issue, was in hospice or their condition was terminal, we used to call and say 'hey, can you rush this claim?'" Stormer said. "They do nothing to help us anymore.

"The V.A. changed their whole system in November. It used to be a four- or five-page application, now it's a 25-page application and that's part of the problem."

But having no change for special consideration of special circumstances bothers Stormer the most, she said.

"If someone is in a nursing home, they need money to stay there, and their kids and family are trying to pay that bill — they won't even budge on it," Stormer said. "That's money that they're owed. And that's the worst part of it. A claim is forever anymore.

"Unacceptable, as far as I'm concerned."

The rewards, however, have been plentiful too.

She worked with the last of Indiana County's World War I veterans, and remembered when the last known doughboy died.

There have been thousands of World War II servicemen, thousand who went to Korea and thousands more Vietnam veterans. And until there's any surge of claims from Gulf War veterans and all those who have been deployed since 9/11, Stormer said, most of the veterans through her doors still are those who fought in Southeast Asia — a lot affected by Agent Orange.

"It's all the thank yous people come in and give you," she said. "Or the hugs! Or the letters you get in the mail.

"And we have had huge awards through our office for Agent Orange (claims). We have had awards like \$500,000 or \$750,000. We worked and worked and worked and worked on those claims, and when they finally get it, it's like 'Yesss!'" Stormer said.

For the best and worst of what the V.A. can do or does, Stormer said, her parting advice is for veterans to visit the office. It's on the second floor of the courthouse.

"They need to get registered with the V.A., and register with the V.A. hospitals. You only have a certain amount of time to do that," Stormer said. "Get in touch with your county director. Get your discharge recorded like you're supposed to. And keep in touch because there are other benefits."

Getting in the office and getting their claims filed should get them something, someday. Not coming in and not filing will guarantee them nothing, she said.

"I've been blessed to have this job and be able to help as many people as I have through the years. It's very rewarding," Stormer said. "And I have to say I've had awesome groups of commissioners. I've been here 44 years; I have never had a commissioner that gave me a hard time.

"They will ask you things that they need to ask you, but they have pretty much let us run the office, do what we needed to do. And if I needed anything, they have always been very

supportive. Always have. And I have been really, really lucky, because in a lot of counties, it doesn't run like that."

As members of the salary board, the Indiana County Commissioners on Tuesday shared the sentiment.

"Obviously she's been a strong advocate for veterans in Indiana County. In 44 years, she has touched a lot of veterans, and their families," Commissioner Rod Ruddock said. "She will be a missed supervisor here."

"She has been a fixture in that office for a very long time and has done an outstanding job for our veterans, so it's with very much regret that we accept her retirement," Commissioner Mike Baker said.

The commissioners didn't indicate a timeline for appointing a successor to Stormer as director of veterans' affairs.

[Back to Top](#)

6.7 - The Daily Independent: [Court program gives veterans second chance](#) (30 June, Carly Carver, Ashland, KY)

CATLETTSBURG – A United State Marine has a chance at a fresh start thanks to hard work and a specialized court program led by circuit court judges in conjunction with the VA.

Veterans Court assists veterans in need.

James "Jim" Blankenship, a United States Marine Corps veteran, graduated from Boyd County Circuit Court's Veterans Court Program on Thursday, with all criminal charges being dismissed and diverted.

Blankenship was originally charged with trafficking in a controlled substance but graduated Veterans Court after being enrolled since last year and successfully meeting all requirements with no complications or setbacks.

"It gives me great pleasure to enter an order this afternoon that dismisses the criminal charges against Mr. Blankenship, dismissed due to his participation and completion of the Veterans Court program," Boyd County Circuit Judge John Vincent said. "Congratulations, we're very, very proud."

Blankenship, who served as an infantry marine from 1993 to 1996, said that the judges and Veterans Court allowed him a new opportunity in his life.

"I just wanted to thank everyone here," Blankenship said. "Thank you to my family."

The courtroom was filled with supporters from the VA, court staff, along with several members of Blankenship's family and friends.

"You all won't be seeing me again," Blankenship said with a smile to the judges.

Veterans Court is an outreach program that is affiliated with the VA Medical Center, and is officially called the Veterans Justice Outreach Program, Vincent said.

"It's designed to work with local justice system partners to identify veterans that enter the justice system and are in need of treatment services rather than incarceration," Vincent said.

Angela Miller, Veterans Justice Outreach Specialist with the VA Medical Center, said the program aims to help those with criminal charges work on appropriate treatment, not just incarceration, and treat the deeper root issue.

"Every veteran gets an assessment, and those who are a good fit for veterans court gets treatment," Miller said. "We link them to the appropriate service for the underlying issue."

"This is our first graduation during the calendar year 2019," Vincent said. "We're very proud in Boyd County to continue in this program. We have it and we are even now receiving referrals from other counties to allow us to process those eligible for Veterans Court in our system."

Miller said that after receiving a referral for Blankenship in July 2018, he was then admitted to the program in September 2018.

"We're very proud of him," Miller said. "He's someone who was absolutely devoted to working on the treatment team's recommendations. Someone who actively engaged. He actively participated in all the things they asked him to do. He was fully engaged, fully committed and graduated without any sanctions or restarts."

"It's pretty intense, it made me take a long hard look at myself," Blankenship said. "I have a great family and a huge support group. I couldn't have done it without them."

Blankenship said he attended weekly meetings, therapies, and multiple other requirements of the court to graduate.

VA Medical Center Director Brian Nimmo attended to support Blankenship.

"On behalf of the Department of Veteran's Affairs we wanted to congratulate you," Nimmo said. "Hoorah!"

"Semper Fi!" Blankenship said.

Vincent said that the "father" of the Veterans Court Program is Boyd County Circuit Judge George Davis.

"Judge Davis was instrumental in working with Supreme Court Justice Will T. Scott in bringing this program to Boyd County," Vincent said. "We owe him a gratitude of thanks because a nation should always cherish their veterans and this program allows us to act that way for our citizens in Boyd County."

"I'd like to commend Judge Vincent for presiding over Veterans Court in this division, he stepped up and he has a passion for those who served our country," Davis said. Davis said that when the program started there was no funding, so Veterans Court operates solely through the Veterans Administration and has no expense to the taxpayers.

"Your honors, I wanted to express our appreciations to you, thank you for supporting our veterans," Nimmo said. "We couldn't be more proud. This really takes a team."

"While you're here Mr. Director I want to acknowledge the tremendous job your staff does," Vincent said.

For more information on the Veterans Justice Outreach Program, contact Miller at (304) 429-6755 ext. 4622 or at angela.miller11@va.gov.

[Back to Top](#)

7. Other

7.1 - The Daily Caller: [Hassan Likely Didn't Notify Constituents Whose Data May Have Been Exposed, Despite Pushing Law Requiring It For Companies](#) (30 June, Luke Rosiak, 3.9M uvm; Washington, DC)

Sen. Maggie Hassan's computer system was hacked in what prosecutors called the "largest data theft in Senate history," yet there is no evidence she informed constituents who may be at risk of identity theft as a result — despite being one of the most vocal advocates for laws requiring hacking victims to do just that.

The New Hampshire Democrat's former IT aide Jackson Cosko was sentenced to four years in prison June 19 for pilfering essentially all the office's data by paying another Hassan staffer to help him break into the office late at night.

One of Hassan's key issues in the Senate has been requiring companies to notify Americans whose personal information they fail to protect. Hassan sponsored a federal law to that end, but it has not passed.

A 2006 New Hampshire law enacted while Hassan was a state legislator requires "any person doing business in this state" to notify anyone whose private data they possess if their systems are hacked, exposing individuals' data such as social security numbers. It is a crime to knowingly disregard the statute.

Constituents who came to Hassan for help called it a betrayal, while a government ethics expert said it was profound hypocrisy.

"What about all the data that was hijacked belonging to her constituents? This was an extensive theft of personal data. She should inform the victims of just what information was breached," said Tom Anderson, a government ethics expert with the National Legal and Policy Center.

Like any senator's office, Hassan's office has the private information of huge numbers of constituents who seek help dealing with federal agencies. The topics are often personal issues such as social security payments, Medicare health issues, and immigration issues.

D.C.-based staff were also affected by the breach, and Virginia also has a similar law with text noting it applies to government entities, too.

Hassan herself has noted that on top of complying with the law to avoid penalties, companies have a moral obligation to protect Americans who trusted them with their data.

"There are state-by-state laws requiring private and public entities to notify individuals when there are security breaches of their personal identifying information. These laws represent the lowest amount of communication required. I'm interested in what companies are proactively doing," she told Equifax's CEO in November 2017.

A Hassan staffer caught Cosko in the act Oct. 2, 2018. Cosko tried to extort the witness into silence, according to his plea deal.

"I own EVERYTHING," he said, rattling off sensitive data. "If you tell anyone I will leak it all."

Eight days later, on Oct. 10, Hassan railed against Google for not informing people when it discovered a bug in the Google+ API that could potentially leak users' information.

"It is really concerning to me that an incident affecting this many people didn't have to be disclosed publicly," Hassan said. "This incident further highlights the need for a closer look at how we might structure data breach notification in federal legislation."

Hassan's office provided no evidence to the Daily Caller News Foundation that it had disclosed its own breach, and several New Hampshire residents who had communicated with Hassan's office told the DCNF they had not received any notification that their information could be in the hands of bad actors. Records showing Senate offices' mailings to constituents show none from Hassan.

Digital consumer protection laws require that companies notify victims when their data is breached if the data includes certain sensitive fields, such as Social Security numbers or drivers licenses. When constituents ask Hassan for help with a problem, she has them fill out a privacy waiver form that requires them to give her their SSN.

Constituents burned

Peter J. Gonsalves Jr., a New Hampshire veteran who said he has a master's degree in public administration, said he went to Hassan's office desperately seeking help after he faced homelessness following problems with the Department of Veterans Affairs.

Hassan's office has "medical and personal info on me and they have never told me about any breach," he told the DCNF. The apparent breach was a blow to someone who was already down.

"I suffer from depression. The VA and the government have destroyed my life," he said.

Tony Woody, a New Hampshire veteran who has blown the whistle about problems at the Manchester VA medical facility, which subsequently became the focus of national news coverage and of federal probes, said he provided evidence about VA wrongdoing that, if leaked, could put him at risk of retaliation.

"That could be me. But I don't know since I've never heard anything," he said of the group of people affected by the breach. "Maggie got copies of all my evidence. I don't want that coming out. There was medical stuff in there, personal stuff. She's going to have to answer some really hard questions."

He said Hassan was sloppy.

"He was already a convicted felon when she hired him? Why would she do that? This is IT in the U.S. Senate. What is wrong with people?"

[...]

[Back to Top](#)

7.2 - National Catholic Register: [After Amputation, Student Turns to Football — and Faith](#)
(30 June, Stephen Beale, 321k uvm; Irondale, AL)

At first they thought they were bone cysts.

Sebastian Bonaiuto, then an eighth-grader heading into high school, was having trouble with his left ankle, and his foot was getting swollen. In August 2016, he had a surgery to remove what doctors believed was a cyst in his left heel bone. A second surgery occurred one month later.

But Sebastian was still having issues with his foot in October, leading to a third surgery in November 2016.

That's when a test turned up the real problem: Sebastian had osteosarcoma, a type of bone cancer.

"I was pretty scared, obviously," Sebastian said.

It wasn't the first time the family had heard that kind of a diagnosis.

In 2008, his mother, Jessica, was diagnosed with breast cancer. She died in 2011.

"It was incredibly scary. It was devastating for me to hear the diagnosis," said Dominic Bonaiuto, Sebastian's father. "The thought crept into the back of my mind that I can't believe that we might have to be dealing with this again."

Instead of chemotherapy, Sebastian would need another surgery. This time it would be an amputation of his left foot at the ankle. "It was a bit of a gut punch," Dominic said.

A Good Sport

After a successful surgery in March 2017, Sebastian turned his attention from surviving the cancer to moving past the amputation. For Sebastian that meant getting back into sports — especially football. "At first I was a little bit worried. I'm pretty athletic, so I was worried I wasn't going to be able to play sports, but then I kind of just decided I'm not going to let this stop me. I'm going to continue playing sports," Sebastian said.

Before the surgery, Sebastian met with John Hattingh, a prosthetist and the owner of the Prosthetic Care Facility of Virginia. Hattingh asked Sebastian what he wanted to do when he recovered. The first thing he said was that he wanted to play football — and Hattingh pledged to help him do it.

Hattingh's facility fitted Sebastian with his first prosthesis in May 2017. Two more prostheses followed, with the final one completed in May 2018. The last one was a combination of a blade with a heel component that gave Sebastian both agility and stability, allowing him to play football, according to Hattingh.

Thanks to his prosthetic foot, Sebastian was able to get back into sports at Thomas Edison High School in Alexandria, Virginia. In the spring of 2018, he joined the track team, where he threw discus and shot put. In the summer of 2018, he participated in a recreational swim league. Finally, this past fall, as he entered his junior year, Sebastian began playing for the varsity football team as the long snapper.

"The remarkable aspect of this success story is really the amount of time and grit that this young man had to re-applicate himself to use a prosthesis to the maximum of the prosthetic's ability," Hattingh said.

Love Foots the Bill

Hattingh's facility, which is family owned and operated, also donated a prosthetic fin, which helped Sebastian to swim. (The total value of the donation was \$17,000. The facility also contributed a \$7,000 upgrade to his prosthesis.)

"This kid is phenomenal. I can't do enough for this kid because everything I give him he just turns it into a miracle," Hattingh said.

Over the course of his recovery, the Bonaiutos relied on the support of both communities at the two parishes they attend — Our Lady, Queen of Peace in Arlington and St. Bernadette in Springfield.

Father Joseph Chacko, a chaplain who has counseled veterans who have had amputations, said losing a limb can be a form of death. There is a certain emptiness that follows.

But the meaning of that emptiness is transformed by the reality of Jesus' empty tomb. "At the time of Jesus' resurrection, the empty tomb was a symbol of hope for the disciples, whereas, for some other people — Jesus' opponents — it's a symbol of fear," said Father Chacko, who works at the James A. Haley V.A. Medical Center.

In Scripture, fear is associated with darkness, while light symbolizes trust and hope in God's love. That light, Father Chacko said, comes through faith. "The people of faith ... trust in the Lord. So the faith dispels the darkness," Father Chacko said.

Sebastian has found this truth in his own journey.

Steps of Faith

Sebastian, now 16, also relied on his personal faith in God. "I really found strength through my faith. I prayed on it a lot," Sebastian said.

"I really believe that everything happens for a reason. God's got a plan for everybody, and I guess this is my plan," Sebastian said. "No matter what you're dealing with, just make the best of it. That's what I've always done. I've always looked for the positive in everything I was doing."

Father Chacko encourages veterans to have a similar mindset. For those who are going through loss and grief, he suggests a three-step process of acknowledging the loss, seeing what remains and looking for what's possible under the current circumstances. "I tell people: Every crisis is an opportunity. So it can be a stumbling block or it can be an opportunity for a stepping stone," he said.

Sebastian has already had the opportunity to step out and give back. He has spoken at a dinner for sarcoma survivors and recently visited a hospital where he offered advice to a girl who had undergone a similar amputation. He has also run a 5K to benefit for the Inova Children's Hospital, where Sebastian also had his surgeries.

Sebastian is thinking of ways he can give back in the future – and as a junior he is already scoping out colleges that will help him achieve his plan. Sebastian once wanted to be an engineer, and now, after his experience, he has narrowed his interest to the field of prosthetics. In fact, Sebastian even assisted in constructing the last two prosthetic feet he received, according to his father, helping out in the cutting and lamination process for each.

Bonaiuto, who works in government and community relations for the Inova hospital system, says he's "incredibly" proud of all that his son has done. "You couldn't ask for more," he said.

He says he hopes his son's story inspires others going through struggles. "I hope people would know that everyone does have their own inner strength. Hopefully they have the faith to rely upon that and draw upon their own faith and their own community for strength and that inspiration when they feel times are most difficult," Bonaiuto said. "No one goes through anything like this alone."

[Back to Top](#)



Veterans Affairs Media Summary and News Clips

1 July 2019

1. [Top Stories](#)

1.1 - The Wall Street Journal: [Is the Supreme Court's Job to Defer? Kagan and Gorsuch clash over separation of powers and the right method of interpreting regulations](#) (30 June, Peter J. Wallison, 11.7M uvm; New York, NY)

The Supreme Court last week decided an important case in a way that left many observers confused about what it had actually done. At issue in *Kisor v. Wilkie* was whether to overturn *Auer v. Robbins* (1997), which held that lower courts must defer to federal agencies' interpretations of their own rules. The justices voted unanimously to send the case back to the lower court, which had invoked *Auer* deference in approving a Veterans Affairs Department interpretation of its own rule.

[Hyperlink to Above](#)

1.2 - Herald-Tribune: [VA approves psychedelic ketamine for PTSD treatment](#) (30 June, Billy Cox, 203k uvm; Sarasota, FL)

This month's decision by the U.S. Department of Veterans Affairs to offer a psychedelic drug to treat post-traumatic stress disorder while marijuana remains off limits is leaving some stakeholders flummoxed amid the ongoing wave of veteran suicides.

[Hyperlink to Above](#)

1.3 - The Kansas City Star (Video): ['Queen of cover-ups': Head of Kansas City VA hospital has history of withholding info](#) (30 June, Andy Marso, 164k uvm; Kansas City, MO)

The leader of the Kansas City VA Medical Center has been under fire for withholding information about a patient's death, allegedly at the hands of Veterans Affairs Police. That secrecy seems to be a pattern. Years earlier, that leader, Kathleen Fogarty, was also accused of cover-ups at her previous job as head of a Tampa, Florida, VA hospital.

[Hyperlink to Above](#)

2. [Improving Customer Service](#)

2.1 - Forbes: [Veterans Affairs Approves 'Ketamine-Like' Drug Despite Cost, Doctors' Misgivings](#) (30 June, Janet Burns, 34.3M uvm; New York, NY)

In June, the Department of Veterans Affairs chose to approve the use of a new, expensive anti-depressant despite concerns about the drug's effectiveness, and a backdrop of political speculation about the president's involvement.

[Hyperlink to Above](#)

2.2 - U.S. News & World Report (AP): [Cicilline Plans Event for Vets With Veterans' Committee Head](#) (30 June, 12.3M uvm; Washington, DC)

U.S. Rep. David Cicilline is planning a barbecue for veterans with the head of the House Veterans' Affairs Committee. The Rhode Island Democrat announced Thursday that he's holding a community conversation and barbeque at the Slater Memorial Park pavilion in Pawtucket. House Veterans' Affairs Committee Chairman Mark Takano, a California Democrat, plans to attend the July 14 event. It begins at noon.

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2.3 - WBKO (ABC-13, Video): [June is PTSD Awareness Month, local veteran shares his battle](#) (30 June, Allie Hennard, 46k uvm; Bowling Green, KY)

June is PTSD Awareness Month and one local veteran has shared his story to in hopes of bringing awareness year-round. About 11-20 out of every 100 veterans who served in the Iraq or Afghanistan wars will suffer from post-traumatic stress disorder in a given year, according to the National Center for PTSD.

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2.4 - The Gainesville Times: [Sam Walley's journey through war, wounds and recovery](#) (28 June, Nick Bowman, 27k uvm; Gainesville, GA)

Samuel Walley's mind was clear as the blast separated the soldier from the earth and two of his limbs, lifting him 20 feet on a cloud of dust and adrenaline and death. He's younger than he looks, leaning forward over a coffee table in the over-air-conditioned lobby of the Martha T. Nesbitt Academic Building at the University of North Georgia Gainesville campus. Covered in tattoos but holding onto the clean-cut military haircut, he navigates life using a prosthetic leg and a head full of experience and memories that most 26-year-olds in Gainesville are blessed to be without.

[Hyperlink to Above](#)

3. [Business Transformation](#)

4. [DOD Cooperation / Electronic Health Records / MISSION Act Implementation](#)

5. [Suicide Prevention](#)

5.1 - Times Record: [Community Matters: Unlocking the veteran suicide crisis](#) (30 June, Sen. John Boozman (R-Ark.), 15k uvm; Fort Smith, AR)

A retired colonel in the Arkansas National Guard recently shared his frustration with missing the signs of mental health struggles among a former soldier under his command. Similar tragedies are happening daily across the country, but veterans — who represent about eight percent of Arkansas's population — are particularly vulnerable. Sadly, they account for about 20 percent of suicides in our state.

[Hyperlink to Above](#)

6. [Women Veterans / Homelessness / Benefits / Cemeteries](#)

6.1 - WSOC (ABC-9, Atlanta Journal-Constitution): [Community comes together to help 99-year-old World War II veteran facing eviction](#) (30 June, Jeremy Turley, 327k uvm; Charlotte, NC)

Even though they are usually not the type of people to ask for help, Marian Ryttonen and her family needed a hand. The 99-year-old World War II veteran was facing eviction from her

nursing home after a trusted caretaker allegedly embezzled her life savings and payments she should have gotten from the Department of Veterans Affairs were stuck in bureaucratic limbo.

[Hyperlink to Above](#)

6.2 - Staten Island Advance: [Smart home will be a life changer for veteran who changes lives](#) (30 June, Ann Marie Barron, 161k uvm; Staten Island, NY)

Michael Sulsona can reach deep into a broken war veteran's heart and find strength, determination and hope. But reach the top shelf in a kitchen cabinet? That's been a challenge for the retired Marine Corps sergeant ever since the day he lost both of his legs to a land mine while serving in central Vietnam.

[Hyperlink to Above](#)

6.3 - The Topeka Capital-Journal: [Harry Colmery's niece recalls humility of World War I pilot, GI Bill...](#) (30 June, Tim Carpenter, 62k uvm; Topeka, KS)

Jean Colmery Roberts remembers well the late 1943 visit from her uncle at her apartment outside of Washington, D.C. Her guest was Harry Colmery, who was weary from a long night composing on Mayflower Hotel stationary a draft of what evolved into the GI Bill of Rights.

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6.4 - Johnson City Press: [Giving credit to those who served in U.S. Nurse Cadet Corps](#) (30 June, Robert Houk, 33k uvm; Johnson City, TN)

Agnes Lowe is on a mission. The retired nurse is asking Congress to recognize her and other former members of the U.S. Cadet Nurse Corps as veterans of World War II. She doesn't want proclamations, medals or medical benefits from the U.S. Department of Veterans Affairs. Lowe simply wants nurse cadets given credit for their service to the country with an honorable discharge and veteran burial status.

[Hyperlink to Above](#)

6.5 - Observer-Reporter: [VetFest bring services to Wild Things Park](#) (30 June, Scott Beveridge, 24k uvm; Washington, PA)

Iraq War veteran John Corl said he bounced around homeless shelters until he sought services from the Wounded Warrior Project in Pittsburgh. The Green Tree man said getting help for his service-related issues brought him to the point where he's now ready to enroll in college and gain employment. "Wounded Warrior helped me," Corl said Saturday at VetFest at Wild Things Park in North Franklin Township.

[Hyperlink to Above](#)

6.6 - The Indiana Gazette: [Indiana County VA director set to retire](#) (30 June, Chauncey Ross, 16k uvm; Indiana, PA)

For better and worse, technology and bureaucracy have provided some of the biggest changes in service to American military veterans over the past four decades. For all the ups and downs assured by 44 years in one job, and for what the cliché of a rollercoaster ride could too easily be applied, heading Indiana County's Veterans Affairs office been a trip that Brenda Stormer said she never wanted to end.

[Hyperlink to Above](#)

6.7 - The Daily Independent: [Court program gives veterans second chance](#) (30 June, Carly Carver, Ashland, KY)

A United State Marine has a chance at a fresh start thanks to hard work and a specialized court program led by circuit court judges in conjunction with the VA. Veterans Court assists veterans in need. James "Jim" Blankenship, a United States Marine Corps veteran, graduated from Boyd County Circuit Court's Veterans Court Program on Thursday, with all criminal charges being dismissed and diverted.

[Hyperlink to Above](#)

7. [Other](#)

7.1 - The Daily Caller: [Hassan Likely Didn't Notify Constituents Whose Data May Have Been Exposed, Despite Pushing Law Requiring It For Companies](#) (30 June, Luke Rosiak, 3.9M uvm; Washington, DC)

Sen. Maggie Hassan's computer system was hacked in what prosecutors called the "largest data theft in Senate history," yet there is no evidence she informed constituents who may be at risk of identity theft as a result — despite being one of the most vocal advocates for laws requiring hacking victims to do just that.

[Hyperlink to Above](#)

7.2 - National Catholic Register: [After Amputation, Student Turns to Football — and Faith](#) (30 June, Stephen Beale, 321k uvm; Irondale, AL)

At first they thought they were bone cysts. Sebastian Bonaiuto, then an eighth-grader heading into high school, was having trouble with his left ankle, and his foot was getting swollen. In August 2016, he had a surgery to remove what doctors believed was a cyst in his left heel bone. A second surgery occurred one month later.

[Hyperlink to Above](#)

[Back to Top](#)

1. [Top Stories](#)

1.1 - The Wall Street Journal: [Is the Supreme Court's Job to Defer? Kagan and Gorsuch clash over separation of powers and the right method of interpreting regulations](#) (30 June, Peter J. Wallison, 11.7M uvm; New York, NY)

The Supreme Court last week decided an important case in a way that left many observers confused about what it had actually done. At issue in *Kisor v. Wilkie* was whether to overturn *Auer v. Robbins* (1997), which held that lower courts must defer to federal agencies' interpretations of their own rules. The justices voted unanimously to send the case back to the lower court, which had invoked *Auer* deference in approving a Veterans Affairs Department interpretation of its own rule. The majority opinion, written by Justice Elena Kagan, added a complicated set of considerations before a court could defer to an agency's rule. In effect this new rule replaced *Auer* deference.

Yet the court was divided on whether anything should supplant the former rule. The three other liberals concurred with Justice Kagan, while the four conservative associate justices joined most or all of a concurring opinion by Justice Neil Gorsuch. Chief Justice John Roberts signed on to most of the Kagan opinion, which made it the court's formal decision. But he also wrote in a concurring opinion that "the distance between the majority and Justice Gorsuch is not as great as it may initially appear." That distance is nonetheless significant.

A major problem with *Auer* deference is its inconsistency with the Administrative Procedure Act, which says that courts should determine the meaning of statutes and regulations. Deferring to an agency's interpretation would seem to violate that directive. But Justice Kagan argues that deference may still be appropriate if, after using "all the standard tools of interpretation," the court cannot resolve an ambiguity. "Only when that legal toolkit is empty and the interpretive question still has no single right answer can a judge conclude that it is 'more [one] of policy than of law.'" If the issue is policy and not law, she reasons, a judge should defer to an agency's expertise—provided that its interpretation is "reasonable."

If lower courts take Justice Kagan's opinion seriously, the result will be a limited deference rule that significantly reduces the power of administrative agencies to interpret their rules. But that wasn't enough for Justice Gorsuch.

He argued that anyone who appears before a federal court is entitled to a fair and unbiased hearing, as well as the court's best judgment about the meaning of the statute that authorized the contested rule. In his view, *Auer* deference—even under Justice Kagan's more restrictive formulation—puts the government's thumb on the scale. If the reviewing court cannot resolve an ambiguity in the regulation's language, a tie goes to the agency, so long as its determination is "reasonable."

A reasonable reading, however, may not be the same as the court's best reading of what a statute or regulation says. "After all," Justice Gorsuch writes, "if the court agrees that the agency's reading is the best one, *Auer* does no real work; the doctrine matters only when a court would conclude that the Agency's interpretation is not the best or fairest reading of the regulation" but is reasonable as a matter of policy. Yet the APA says reviewing courts should

"decide all relevant questions of law" and "set aside agency action . . . found to be . . . not in accordance with law."

In addition, Justice Gorsuch wrote, the Constitution creates a separation of powers among Congress, which makes the laws; the executive, which enforces the laws; and the judiciary, which, as Chief Justice John Marshall said in *Marbury v. Madison* (1803), has "the province and duty . . . to say what the law is." A requirement that the judiciary defer to the executive's interpretation of law may not be consistent with this separation.

Finally, there is the rule of law. Justice Kagan's formulation suggests that when a court cannot resolve an ambiguity in a rule, it is in effect faced with a question of administrative policy. The court should defer, Justice Kagan argues, because policy is different from law, and beyond the court's expertise. But Justice Gorsuch argued that administrative rules and regulations are no less binding on the public than laws are, and the meaning of a law or regulation is not necessarily in line with the agency's preferred policies. "We are governed," Justice Gorsuch argued, "not by the shifting whims of politicians and bureaucrats, but by written laws whose meaning is fixed and ascertainable."

Thus, the argument between Justices Kagan and Gorsuch raises in stark form the age-old argument about whether the judiciary should determine policy in the guise of interpreting the law, or the executive should determine what the laws actually mean in the guise of its dominion over policy.

The same questions arose in the famous case of *Chevron v. Natural Resources Defense Council* (1984), in which the justices directed lower courts to defer to agencies' views when a statute itself is ambiguous. Chevron deference is much bigger and more important than Auer deference, but it is notable that in his concurring opinion in *Kisor* the Chief Justice—who in earlier cases has questioned the validity of Chevron—remarked that "I do not regard the Court's decision today to touch upon" Chevron.

After the lower court applies the deference test reformulated by Justice Kagan, it will likely return to the high court for review. Despite Chief Justice Roberts's view that Auer and Chevron are not linked, it seems that the fate of both doctrines will be determined by his view of how far the judiciary should go in deferring to executive interpretations of ambiguous laws and rules.

Mr. Wallison is a senior fellow at the American Enterprise Institute and author of "Judicial Fortitude: The Last Chance to Rein In the Administrative State."

[Back to Top](#)

1.2 - Herald-Tribune: [VA approves psychedelic ketamine for PTSD treatment](#) (30 June, Billy Cox, 203k uvm; Sarasota, FL)

This month's decision by the U.S. Department of Veterans Affairs to offer a psychedelic drug to treat post-traumatic stress disorder while marijuana remains off limits is leaving some stakeholders flummoxed amid the ongoing wave of veteran suicides.

Spravato, derived from the family of anesthetic drugs called ketamine and produced by a division of Johnson & Johnson, will be prescribed to VA clients on a case-by-case basis and administered as a nasal spray.

Ketamine variants have made headlines over the decades for their multiple roles as sedatives, recreational hallucinogens and for their impressive track records for mitigating suicidal depression. The Spravato version, which was approved by the U.S. Food and Drug Administration in March, requires patients to remain under professional observation for two hours following ingestion.

The addition of a new remedy for lowering military suicide rates at a moment when retired and active-duty personnel are killing themselves roughly 20.6 times a day was hailed as a milestone by VA Secretary Robert Wilkie. "We're pleased to be able to expand options for veterans with depression who have not responded to other treatments," he said in a statement. "It reflects our commitment to seek new ways to provide the best health care available for our nation's veterans."

But for those like Sean Kiernan, an Army veteran who attempted to take his life in 2011, the VA's simultaneous embargo on marijuana is incoherent.

"Ketamine was the most effective drug I've ever taken for suicidal thoughts — but it is not a long-term medicine you should use. I got psychologically addicted to it for four years," says Kiernan, president of the Weed For Warriors Project, which advocates legal cannabis for veterans, with 12 chapters nationwide.

"The danger with ketamine is the side effects, like on your urinary tract and gall bladder. I've had three surgeons telling me I need to have my gall bladder removed. My question is, why are you so willing and eager to accept something that, on the face of it, is the very thing you complain about with marijuana, like THC, which isn't nearly as strong? This is hypocrisy, and it makes no sense."

Catch-22 for veterans

The nation has been struggling with that contradiction since marijuana was classified as a Schedule 1 drug with the Controlled Substances Act of 1970.

The Herald-Tribune documented the Catch-22 that many veterans find themselves in and the effort of proponents to change the law last year in its "Warriors Rise Up" project.

Despite the fact that more than 2.5 million Americans are legally using medical marijuana for ailments as disparate as fibromyalgia and cancer, all drugs labeled Schedule 1 are regarded as having no medicinal value. Ketamine is a Schedule 2 substance.

CNN reported in February that the military suicide virus is now beginning to sweep the ranks of America's elite warriors, with U.S. Special Operations Command counting 22 self-induced fatalities in 2018. Eight SOCOM operators took their lives the year before. Also, in April, the self-inflicted gunshot death of a 68-year-old veteran in a VA parking lot in Virginia brought to 22 the number of veterans who've killed themselves at VA facilities in the past 20 months.

For researchers like Brad Burge, however, the willingness of establishment medicine to employ psychedelics for the treatment of PTSD and associated psychological issues bodes well for the future of marijuana. "It is good news," he says. "It shows that things are changing in the acceptance of these drugs for mental illness."

Burge is director of strategic communications for the Multidisciplinary Association for Psychedelic Studies. Founded in 1986 by New College alum Rick Doblin, MAPS is establishing scientific and legal foundations for the expanded use of psychedelics and cannabis.

The nonprofit research organization is completing Phase 3 trials on MDMA-assisted therapy. That drug, also commonly known as Ecstasy, is a controversial synthetic stimulant banned in 1985. MAPS is also studying the therapeutic applications of LSD, and it hopes to get funding for investigating Ibogaine- and Ayahuasca-assisted therapy.

Early this year, MAPS completed its first study of medical marijuana on 76 veterans diagnosed for PTSD, and will publish its results before the end of 2019. But until cannabis loses its Schedule 1 status, gaining access to acceptable samples of marijuana for the completion of MAPS' research will be difficult.

"But things are changing," says Burge. "The heads of all these administrative bodies have acknowledged there are limitations that shouldn't be there. They don't want to be put in the position of obstructing legal research."

Grilled by lawmakers in April, conservative Attorney General William Barr described the breach between the states and the feds on marijuana policy as "intolerable," though he remained opposed to national legalization. A bipartisan coalition of House and Senate members is backing the Strengthening the Tenth Amendment Entrusting States (STATES) Act. STATES would exempt all businesses and individuals engaged in state-licensed marijuana activity from federal law enforcement, but the proposal still falls short of descheduling marijuana. Congress has the ability to change marijuana's status.

For veteran Sean Kiernan, the longstanding government argument against legalizing marijuana becomes glaringly archaic when compared with the mind-altering impact of a ketamine product.

"Cannabis is nowhere near as debilitating and it allows you to function in society," he says from San Diego. "I can safely use cannabis daily for the rest of my life. But hey, if you like to party? You'll love ketamine."

[Back to Top](#)

1.3 - The Kansas City Star (Video): ['Queen of cover-ups': Head of Kansas City VA hospital has history of withholding info](#) (30 June, Andy Marso, 164k uvm; Kansas City, MO)

The leader of the Kansas City VA Medical Center has been under fire for withholding information about a patient's death, allegedly at the hands of Veterans Affairs Police.

That secrecy seems to be a pattern.

Years earlier, that leader, Kathleen Fogarty, was also accused of cover-ups at her previous job as head of a Tampa, Florida, VA hospital.

A patient's daughter there dubbed her "the VA queen of cover-ups" in 2014, after Fogarty authorized staff to install a hidden camera in the patient's room. Fogarty was also accused of cutting veterans' access to care outside the VA system to save money and denying she was doing it.

The incidents raise new questions about her administration's handling of the death of Dale Farhner in Kansas City.

Farhner, a 66-year-old veteran from Kingston, Missouri, had hernia surgery at the Kansas City VA hospital in May 2018. The surgical wound became infected, and he was driving himself to the hospital's emergency room three days later when a VA police officer confronted him for driving the wrong way in the parking lot. The ensuing altercation left Farhner nearly comatose, according to internal VA documents leaked to USA Today. He died two days later, but the documents reportedly made no determination about whether his death was due to injuries inflicted by VA Police.

The Star learned about Farhner's death last year through an anonymous tip and filed a Freedom of Information Act request that revealed that the VA has documents, audio and video related to the incident. But the VA has repeatedly refused to provide them — or any other any information about the incident — to The Star, to members of Congress and even to Farhner's family, which has since filed a wrongful death lawsuit against the agency.

Randall Barnett, the president of Vietnam Veterans of America's Kansas City branch, has said it smacks of another cover-up.

"If they weren't at fault or didn't feel through their investigation they were somewhat at fault, why would they cover everything up?" Barnett asked. "Or try to cover everything up?"

The Star asked to talk to Fogarty this past week about her time in Tampa and the Farhner incident, but Kansas City VA spokesman Vernon Stewart provided only written responses via email.

"Federal law enforcement officials have already fully investigated this matter and determined that VA acted appropriately in its interaction with the veteran," Stewart said. "VA will cooperate fully with any additional official investigations."

HIDDEN CAMERA

According to an interview she gave with a Florida public radio station in 2015, Fogarty started her career as a dietitian at the Kansas City VA in 1986.

She rose through the ranks over several decades and in 2011 became director of the James A. Haley VA Medical Center in Tampa — one of the nation's largest VA hospitals.

The hidden camera controversy struck soon after.

The incident centered on Joseph Carnegie, a 79-year-old Korean War vet with severe brain damage.

According to an investigation by the VA's inspector general — the agency's internal watchdog — Carnegie's nearly 400-day stay in the hospital was marked by tension. His family repeatedly accused the staff of poor care, and staff members increasingly suspected his relatives were sabotaging his care to set them up.

VA supervisors began discussing whether to hide a camera in the room — a question that eventually was elevated all the way to the executive level. According to meeting notes

uncovered by the inspector general, there was disagreement among the hospital's leaders, until Fogarty herself authorized it.

Carnegie's relatives thought the new smoke detector in his room looked a little odd, and a maintenance man confirmed there was a camera in it. That set off a public controversy first reported by the Tampa Bay Times that drew the attention of then-U.S. Sen. Bill Nelson, who requested the inspector general's investigation.

The inspector general determined that the use of a hidden camera outside of a formal law enforcement investigation was very unusual at the VA, but in this case it was done out of legitimate concerns for patient safety.

"VA's inspector general thoroughly reviewed this nearly seven-year-old matter, determining that 'the patient received extensive, even exhaustive, high-quality care at (the Tampa VA Medical Center) ... the patient's family was aware of the (camera) when it was activated and began to record video images,' and that use of the camera was 'reasonable,'" Stewart, the Kansas City VA spokesman, said.

The Tampa Bay Times, however, found that in the aftermath of the camera's discovery, hospital staff working under Fogarty untruthfully said that the camera was never intended to be hidden (internal memos showed it was), it was not recording (the investigation turned up 43 days worth of video) and that the family knew about the camera and signed a release authorizing it (it hadn't).

In an editorial, the newspaper said Fogarty was responsible for "the hospital's culture of defiance and non-responsiveness to public concerns."

When Fogarty was tapped to temporarily take over the VA's troubled Southwest region in 2014 amid a crisis over falsified patient wait times, Carnegie's daughter told The Arizona Republic she was "disgusted."

"To send the VA queen of cover-ups to Phoenix — it's just a spit in our face," said Natalie Carnegie, who could not be reached for comment for this story.

BUDGET BALANCING

In the radio interview, Fogarty said she had no regrets about the hidden camera because "the decision was made for the safety of that patient." But she also said that if faced with a similar situation she would use an overt camera, not a hidden one.

In 2015 Fogarty took the job as director of the Kansas City VA Medical Center, which she described as a homecoming and a chance to serve at a smaller, less hectic hospital. Her salary — about \$190,000 a year — is roughly the same as what she was making in Tampa Bay.

The following year USA Today included her in a list of VA administrators "transferred to new jobs despite concerns about the care provided to veterans at the facilities they were previously managing."

The news organization cited Tampa Bay Times reporting that showed Fogarty "cut veterans' access to outside care to help overcome a multimillion-dollar deficit as director of the Tampa, Fla., VA, in 2011 and repeatedly denied publicly that she was doing it."

Stewart said USA Today's story was "flat-out false and repeating it to your readers would be irresponsible."

"When Director Fogarty became director of the Tampa VA Medical Center in 2011, she inherited a nearly \$48 million budget deficit," Stewart said. "She balanced the budget by using commonsense management principles such as not filling unneeded positions and eliminating unnecessary overtime and travel. Under Fogarty's leadership, the facility expanded its services to Veterans, and the blueprint she developed for managing the resources remains in place at the VAMC today."

That's not what she told the Arizona Republic.

"In her interview last week, Fogarty said she balanced the Tampa VA budget in three years by reducing the time veterans spent in non-VA hospitals," the newspaper wrote in an article published Nov. 27, 2014.

At least one VA spokeswoman who worked under Fogarty at the Tampa VA denied in 2011 that there even was a deficit — a claim the St. Petersburg Times wrote was "contradicted by the facility's own budget records."

The Farhners' lawsuit is still in its early stages. Their Kansas City attorney, James LaSalle, said the VA had not released any information to the family in response to an administrative complaint they had to file before they could sue.

The agency also has not provided information about what happened between Farhner and police to former U.S. Sen. Claire McCaskill and current U.S. Sen. Roy Blunt, who both requested it.

LaSalle said the VA could be forced to hand over the investigative documents revealed by The Star's records request during the suit's discovery phase, but he had no timeline for when that might happen.

"I know that once it moves to litigation," LaSalle said, "that stuff is evidence at this point."

[Back to Top](#)

2. Improving Customer Service

2.1 - Forbes: Veterans Affairs Approves 'Ketamine-Like' Drug Despite Cost, Doctors' Misgivings (30 June, Janet Burns, 34.3M uvm; New York, NY)

In June, the Department of Veterans Affairs chose to approve the use of a new, expensive anti-depressant despite concerns about the drug's effectiveness, and a backdrop of political speculation about the president's involvement.

The drug, called esketamine (brand-name Spravato), is intended to offer the same kind of effects as a mental health tool that ketamine, a popular recreational drug, veterinary anesthetic, and "darling of combat medics," has been found to offer in clinical studies.

However, recent reporting by Kaiser Health News and others have raised some serious concerns about the drug's adoption, including its effectiveness, its risks, and even its FDA approval process. KHN explained:

The FDA, under political pressure to rapidly greenlight drugs that treat life-threatening conditions, approved it anyway. And, though Spravato's appearance on the market was greeted with public applause, some deep misgivings were expressed at its day-long review meeting and in the agency's own briefing materials, according to public recordings, documents and interviews with participants, KHN found.

Dr. Jess Fiedorowicz, director of the Mood Disorders Center at the University of Iowa and a member of the FDA advisory committee that reviewed the drug, described its benefit as "almost certainly exaggerated" after hearing the evidence.

As the New York Times reported last month, questions have also been raised about President Trump's involvement in the drug's speedy adoption and approval:

The decision to endorse the drug — called Spravato, and manufactured by Janssen, a unit of Johnson & Johnson — came days after President Trump offered to negotiate a deal between the drug maker and the agency. Johnson & Johnson reportedly was working with associates at Trump's Mar-a-Lago club, and the company has been supporting V.A. suicide-prevention efforts.

A spokesman for the V.A. said that the decision to approve the drug, which would cover its use by doctors in its nearly 1,000 clinics nationwide, was a medical one. In a statement, the agency said, "V.A. will closely monitor the use of esketamine"

According to The Guardian, one estimate puts Spravato's potential earnings for Johnson & Johnson at around \$600 million by 2022.

[Back to Top](#)

2.2 - U.S. News & World Report (AP): [Cicilline Plans Event for Vets With Veterans' Committee Head](#) (30 June, 12.3M uvm; Washington, DC)

PAWTUCKET, R.I. (AP) — U.S. Rep. David Cicilline is planning a barbecue for veterans with the head of the House Veterans' Affairs Committee.

The Rhode Island Democrat announced Thursday that he's holding a community conversation and barbeque at the Slater Memorial Park pavilion in Pawtucket.

House Veterans' Affairs Committee Chairman Mark Takano, a California Democrat, plans to attend the July 14 event. It begins at noon.

The committee has jurisdiction over legislation for veterans' health care, benefits and other issues.

The event is free and open to Rhode Island veterans and their families. Cicilline asks that attendees RSVP with his Pawtucket office.

Representatives from the U.S. Department of Veterans Affairs, Rhode Island National Guard and Rhode Island Office of Veterans Affairs will be there to provide information about resources available to local veterans.

[Back to Top](#)

2.3 - WBKO (ABC-13, Video): [June is PTSD Awareness Month, local veteran shares his battle](#) (30 June, Allie Hennard, 46k uvm; Bowling Green, KY)

June is PTSD Awareness Month and one local veteran has shared his story to in hopes of bringing awareness year-round.

About 11-20 out of every 100 veterans who served in the Iraq or Afghanistan wars will suffer from post-traumatic stress disorder in a given year, according to the National Center for PTSD.

"I started out wanting to go into the military because pretty much my whole family was in it," said local U.S Army Veteran Brian Frogge.

For many soldiers, it's a family tradition to join the military.

"I was deployed three times," Frogge said. "While over there is when 9/11 happened. It was just a bad night."

Post-traumatic stress disorder is a mental health problem that some people develop after experiencing or witnessing a life-threatening event.

"You're not expecting all of this stuff to happen like bullets flying around, waking up in the morning having mortars flying over your head hoping and praying that not one of them is going to land close to you," said Frogge.

"When they fired the first missile into Kuwait, it went over my head," he added.

Frogge said he has suffered nightmares, irritability, anger problems, and blackouts.

"I could get upset and I'd have blackouts and I'd walk away and disappear for anywhere from 30- minutes to an hour," he said.

He said his family has seen him at his worst, but have helped him through.

"People don't see behind the curtain so to say, the things that they go through," said Brian Frogge Jr., Brian's son.

Frogge said there is always someone out there to reach out to for help, like the VA Clinic in Bowling Green or fellow veterans.

"He's been going through therapy and he's grown so much from it," his son said.

Since seeing a therapist, Frogge says he doesn't have near as many symptoms.

"Anger issues, I've been able to control those better. The blackouts, I haven't had one in over a year now," Frogge said.

"He's most definitely my hero, I really look up to him," said his son.

"There's help, there's always help," Frogge said.

The VA Clinic in Bowling Green is a local resource available for veterans as well as the veterans crisis line at 1-800-273-8255.

[Back to Top](#)

2.4 - The Gainesville Times: [Sam Walley's journey through war, wounds and recovery](#) (28 June, Nick Bowman, 27k uvm; Gainesville, GA)

Samuel Walley's mind was clear as the blast separated the soldier from the earth and two of his limbs, lifting him 20 feet on a cloud of dust and adrenaline and death.

He's younger than he looks, leaning forward over a coffee table in the over-air-conditioned lobby of the Martha T. Nesbitt Academic Building at the University of North Georgia Gainesville campus. Covered in tattoos but holding onto the clean-cut military haircut, he navigates life using a prosthetic leg and a head full of experience and memories that most 26-year-olds in Gainesville are blessed to be without.

He's the son of a construction worker father, Kelly Walley, and a mother, Connie Walley, who in his early life worked cleaning churches but now works with Project ADAM, a drug-rehab ministry in his hometown.

He's a former soldier of the 82nd Airborne Division and was very close to being killed while deployed to the Zhari district near Kandahar in southern Afghanistan.

These days, he's a student of political science at UNG with hopes of getting into politics to help make life a little easier for veterans. He's lived in Gainesville since leaving the Army in 2014.

"He's been very instrumental in all of our fundraiser events, and he's been a big supporter of For The Warriors Foundation," said Mike Seely, a retired airman and former brigadier general in the Georgia National Guard. "I can't say enough about him. He's been very energetic, very dedicated."

Most of all, Walley's recovered — from his wounds, from the nightmares that followed him home from Afghanistan, from the deaths and suicides of his former squad mates who returned stateside and, for one reason or another, couldn't find their own recovery.

"These are the guys you have to turn back to. You have the biggest commonality with them," Walley said, describing bonds that form tighter than family in the midst of firefights, bomb sweeps and patrol after patrol.

His connection to his fellow soldiers was forged tight in the stress of war: Killing, seeing friends be killed and navigating through a prolonged war in rural Afghanistan.

"When you get out, everybody is going to deal with their demons whether it's 7 weeks after returning stateside or its 20, 30 years down the road," Walley said.

He paused, and then added: "We've lost four guys in my platoon stateside."

'I wanted to be in the fight'

Walley was born June 4, 1993. He attended County Line Elementary, Russell Middle and Winder High School. He graduated in 2010.

He always wanted to be in the military, though didn't know what branch. For about a decade he aimed for the Marine Corps, but his time in Junior Reserve Officer Training Corps in high school taught him that he'd be more at home following his father, who served as a combat engineer, into the Army.

Looking at early enlistment as an upperclassman at Winder High, his choices of role in the Army were whittled down to four: infantry, supply, truck driver, combat journalist.

"My mom wanted me to be a combat journalist," Walley said, chuckling, "but there's no way I was about to go get shot at and not have a firearm to shoot back."

He wanted a combat role — wanted to "be in the fight somehow," he added. "The best way to do it was infantry. So I picked infantry."

He wanted not just to serve but to fight because of 9/11. Though he was just a fourth grader, he remembers the "absolute chaos" of the day terrorists flew two jets into the World Trade Center, killing 2,977, and a third into the Pentagon, killing 125.

"I remember talking to my parents later that day, starting to understand what just happened," Walley said, thinking back to 2001, "but you're still a kid. I don't think I started to fully understand the concept of America being attacked until probably high school."

Young children don't think much of the world beyond the confines of their neighborhoods, he said. Your parents know it all, the world works in a fixed, routine way and the bad guys out there are relegated to bedtime frights and TV.

But Walley got older, and he learned what being attacked meant for a nation that went from enjoying the Peace Dividend to being the victim of the deadliest terrorist attack on the planet.

"You learn that you're not the only one in this world," he said.

Ready for war

The food was good in Kyrgyzstan, one of the stops along the way from Fort Bragg to the Kandahar Airfield in southern Afghanistan.

Eating, waiting and sitting through briefing after briefing — jokes about Microsoft PowerPoint forever rumble through the ranks of the Army — punctuated Walley's days between February and March 2012.

But into March, he was in the thick of Operation Enduring Freedom, leaving the huge airfield for a tiny station at Pan Kalay. On the way, he would get his first taste of combat in the form of a few tiny tinkling sounds while on board a Chinook bound for the outpost.

"We got shot at by a guy in the middle of the desert. He was shooting at us with an AK. That guy, they lit him up. He was dust. He was nothing," Walley said. "That's when it hit me. All I heard was like little tinks, that's it. But after you look out in the field and see this guy and see him get disintegrated, you realize, 'Oh. This is real. This is no longer on paper. This is no longer a game. This is real s--t.'"

He would first enter combat while on patrol at Pan Kalay, a station of about 100 American soldiers and members of Afghanistan's national army.

"I can't really remember times where we went outside the wire and didn't get in a firefight," he said. "The way we did our rotation was three days on, three days off. We would have three days of going on patrol, and those first three patrols — those stuck out to me the most.

"After that, you forget what number it is. It just all starts to become a big blur."

Zhari

Walley lost his right leg, his left arm and almost his life because of a bicycle.

June 6, 2012, started as a normal day — or a routine day, as there wasn't much normal to go around for soldiers in the Zhari district near Kandahar.

Unlike Pan Kalay, Zhari was just a checkpoint not much larger than a football field. It was home to about 30 soldiers.

Two days before — Walley's 19th birthday — a higher-up in the Taliban had been captured by his platoon within the 82nd Airborne Division. Agitated by the loss, the terrorist group was expected to step up activity in the region.

"(We were) going out, going to observe new areas, looking for IED caches, weapon caches, just really getting to know the terrain like it's the back of your hand," Walley said. "We just call it presence patrols, going out and showing face."

Navigating new territory in Afghanistan is a stressful, slow process. And out front goes the mine sweeper.

He's "worried about looking at the ground checking for IEDs, that's their job," Walley said. "There's a guy behind him, the team leader ... that would clear the ground with poker chips. You know if you need to move in and out of an area, you go along the poker chips because you're not going to step near an IED."

On June 6, Walley's platoon pushed to the north of the compound where the Taliban commander had been captured, crawling over grape rows in the countryside when they happened upon a group of four men in what had been established by U.S. forces as a kill zone.

"We pop up out of the grape row and start questioning them. One guy takes off on a bike," Walley said. "I just spoke a little, tiny amount of Poshtun — enough to yell at people and get by. You could tell they were lying."

Through a translator, the men were told to clear the area or potentially be killed if they were seen again.

The man on the bike

"Now, we're worried on this guy on the bike that had just taken off," he said.

The soldiers followed his trail to a two-story structure with bars on the windows, an unusual find for that area of rural Afghanistan.

"It was an L-shaped compound. It was two floors. To get up to the top floor, there was a hill," Walley said. "That's where the road was. What we were going to do to get this guy on the bike was get one team on one side of the road and wait for another team on the other side of the road."

They called in a helicopter that would cut off the man fleeing on his bicycle and, hopefully, flush him back toward the waiting soldiers. In the meantime, they cleared the structure and found a dull knife and burn marks on the floor — clear signs that IEDs were being made in the building.

"All my Spidey senses are going off. Something is wrong," he said.

Others in his platoon searching the structure had just passed into the main chamber, the longest room of the L-shaped structure.

"I look in the door, the long part of the L they just went into, and there's a wire hanging out of the wall," he said. "Nobody had noticed it. My heart sank — at that point, you feel like puking."

There was a bomb planted somewhere in the building.

His team rushed out of the compound. At the same time, they got word the helicopter they called in cut off their target on the bicycle early and they had only a few minutes to prepare to snatch him on his way back.

All the while, they didn't know where the IED was.

With no time to set up an ambush for their target on the roadway, Walley looked for the signal from his leader to improvise.

"With that amount of time, you had literally seconds to react," he said. "I remember hearing the bike, and I just looked across at my squad leader. All he did was nod at me. There was no time."

A capture, at this point, felt out of the question. There was too much at risk — a bomb in the area, no time to prepare for a transport and enemy fighters likely in the area.

"I'll be God honest, in my head I was just going to shoot him," he said. "If something goes bad, it could go really bad and it could be all three of our lives done."

After the signal from his leader, Walley cut wide on the building, doing his best to avoid the edges of the structure where insurgents were known to plant IEDs. He rounded the corner to catch the target as he followed the road down its descent from the top of the structure to the bottom.

Adrenaline pumping, heart in his throat, Walley lifted his weapon, ready to track the target as he rounded the road.

He felt heat, and a short moment later a weightlessness. His mouth was filled with dirt, and he attempted to stand but couldn't figure out why his legs weren't supporting him or his arms lifting him.

His medic pulled him from the dust cloud, which the rest of the soldiers back at the Zhari checkpoint saw rise into the sky. Walley's right leg was severed above the knee, his left arm wrecked and dangling. Shrapnel pocked his left leg, but it remained intact.

"(The insurgents) ended up detonating the IED off to the right of me — right beside this trail that we all just walked in on," he said. "Nobody picked up the IED."

In the aftermath of the blast, someone managed to grab the man on the bike. He was "bagged and tagged," Walley said, and carted off to who-knows-where. The soldier never learned who he was.

Walley was medevaced and on the operating table in fewer than 20 minutes. He held it together and didn't go into shock until the field surgeon removed what remained of his left arm and placed it in a little garbage bag with a biohazard symbol on it.

He would have nightmares about that moment for years.

Post-traumatic stress

"When I first met him, it's been over 3-and-a-half years, some of that was affecting him a lot," said Mike Seely, discussing Walley's wounds both external and internal.

He had been through dozens of surgeries at a Veterans Affairs hospital in Washington, D.C. In that time, he was visited by President Barack Obama, senators, congressmen, professional athletes, leaders of veterans groups and advocates — most of them just wanting to express their thanks, some looking for an easy photo-op with a wounded vet.

He didn't walk again until 2013. When he was discharged from the medical center, he was overweight from months of being bound to a wheelchair.

"Even though I could walk in the summer of 2013, I don't think I got (back to normal) until probably a little over a year ago," he said.

With limited movement and a lot of pain, Walley started another fight stateside, this one against bad dreams, isolation and anger.

"The military is really great on taking a civilian and converting them into a killing machine," Seely said. "The one thing they're not good at is converting them from a killing machine to a productive member of society."

Those early years of civilian life weren't good ones for Walley, who tried to treat his ailments with the usual salves: Alcohol, misbehavior, resentment.

"His attitude wasn't a good one," Seely said. "The Sam that I knew when I first met and the Sam that I know today you'd say are two different people. He's grown a lot in the past almost four years."

Through the work of veterans groups, especially Seely's own For The Warriors Foundation, the soldier was able to turn his life around through "exposure to another element," Seely said.

He enrolled at UNG, got back into a gym routine and now practices Jiu Jitsu — each new step breaking down walls vets struggling through PTSD erect around themselves.

But they haven't come down easy.

He's been a student at UNG for most of the past four years but is just now making real progress with his education. Initially, he was in so much pain from walking the campus that he couldn't manage his schedule.

And then, the past few years have been punctuated by the stateside suicides of soldiers in his old platoon.

"Unfortunately, it's almost separated my platoon a little bit," Walley said. "We all came together when it would happen, but some guys would slowly distance themselves just because of the pain it caused a lot of us."

A new way

The 26-year-old soldier has held himself together both by being helped and helping others. Emerging from isolation, Walley is now an involved member of three organizations: For The Warriors Foundation, the local American Legion Post 7 in Gainesville and the PTSD Foundation of America.

For The Warriors is focused on reintegrating vets back into daily life — helping them form connections that keep them out in the community in order to "fully integrate back into society and live a rewarding, fulfilling and productive life," according to its mission statement.

This comes in the form of golf tournaments, networking events and other activities.

And then there's the American Legion, long run by veterans of the Vietnam War, the last war in which men were drafted and the last mass-service war in the nation's history.

Walley has been a member of the Legion since he left the Army, but in recent months has worked to bring younger veterans into the organization.

"If they don't have new people coming in the bottom, they're not going to survive," said Seely, himself a Vietnam veteran. "What Sam is doing is very perceptive, very proactive."

In mid-June, Walley helped organize an open house at Post 7 specifically to recruit post-Vietnam vets.

"I really want to start getting these Gulf War, (Operation Iraqi Freedom) — getting these guys into these board positions. I simply came out and started trying to get these guys together," he said. "I don't really care to be in a leadership role or anything, I just knew that I knew a lot of people."

His efforts are aimed at helping veterans forge connections with one another and the community at large.

"A lot of these guys aren't encouraged to evolve from their past experiences into their new experiences, their new world," Seely said. "If you don't have exposure to healthy, happy lifestyles and you see what the alternative is to isolationism, you're not going to grow. A lot of these guys who have committed suicide, it's tragic when you look at what could have been done to prevent that."

For the worst cases, the PTSD Foundation is one of the groups working to fill that void.

It handles "more of the nitty-gritty stuff," Walley said. "That's (for) the veterans who are in dark areas. Helping them, sometimes we'll have to go to the Salvation Army to see if there are vets in there."

The foundation runs an intensive camp, similar to a boot camp, in Houston, Texas, where veterans are broken down and, instead of being turned into soldiers, are turned back into citizens.

Despite the wedges of suicide pushed between the fellow soldiers in his platoon, Walley's connections to his friends remains strong. He knew, he said, that he could pull his phone out of his pocket and dial any of them — just to talk, to vent, to ask for help.

He recalled his time in the VA hospital in Washington, when a fellow soldier was hassling a down-and-out Walley to get to work on his PT.

"My old squad leader used to give me crap in the hospital because he's a quad-amputee, and he's walking around," Walley said, laughing. "He'd always tell me, 'Walley, you need to get to walkin'.'"

His interview with The Times was scheduled after he finished with classes for the day. Toward the end of the talk, Walley's girlfriend sat down with him. They talked about their plans for the evening, about whether he was going to head to the gym and what they might do for dinner that night.

Seven years after a terrorist flipped the switch that almost ended his life, Walley is walking just fine.

[Back to Top](#)

3. [Business Transformation](#)

4. [DOD Cooperation / Electronic Health Records / MISSION Act Implementation](#)

5. [Suicide Prevention](#)

5.1 - Times Record: [Community Matters: Unlocking the veteran suicide crisis](#) (30 June, Sen. John Boozman (R-Ark.), 15k uvm; Fort Smith, AR)

A retired colonel in the Arkansas National Guard recently shared his frustration with missing the signs of mental health struggles among a former soldier under his command. Similar tragedies are happening daily across the country, but veterans — who represent about eight percent of Arkansas's population — are particularly vulnerable. Sadly, they account for about 20 percent of suicides in our state. This is why we are working to fully understand the risk factors associated with suicide among veterans and to improve coordination of veteran mental health and suicide prevention services to change this tragic statistic.

Congress has taken steps to improve access and treatment for veterans at risk of suicide. That includes significant funding increases to the Department of Veterans Affairs to decrease veteran suicide rates. In Fiscal Year 2010, the VA requested \$62 million for suicide prevention outreach. That number nearly quadrupled to \$222 million within 10 years. Despite the sharp increase in resources, 20 veterans commit suicide each day. That number has unfortunately remained roughly unchanged. Only six of those 20 veterans are receiving healthcare services at the VA. This points to a significant need to empower the VA to work through community partners to expand outreach.

National data indicate that more than 50,000 organizations provide suicide prevention services for veterans, yet they are hard for veterans to find, access, apply for and use. The VA and these organizations share a common goal of saving the lives of veterans, but lack the framework and authority to coordinate their efforts.

That's why I'm pushing the VA to improve information sharing between the department and veteran-serving nonprofits. I recently partnered with Senator Mark Warner (D-VA) to introduce legislation that would enable the VA to harness the potential of what is already occurring in communities by allowing it to provide grant funding to nonprofits and local organizations for expanded outreach to veterans. The IMPROVE Wellbeing for Veterans Act enhances coordination and planning of veteran mental health and suicide prevention services and would better measure the effectiveness of these programs in order to reduce the alarming number of veteran suicides.

The VA has a real opportunity to work with its partners to develop a tool that can be used to measure not just what services were made available to a veteran, but the effectiveness of the programs. As I talk with veteran-serving groups that provide suicide prevention assistance, I am more convinced that we can work together to create and use a standard measurement tool that helps us in this area. Some nonprofit groups have implemented their own tools to track progress and monitor the results of their veteran suicide prevention programs. The VA should examine how it can work with partners to develop or adopt a measurement tool that would be used uniformly across all groups. This will allow the VA and its partners to identify which suicide prevention efforts are having the most impact so that resources can be concentrated effectively.

The legislation has been well-received. VA Secretary Robert Wilkie expressed his support for our bill, calling it "key" to unlocking the veteran suicide crisis. Representatives Jack Bergman, R-Mich., and Chrissy Houlahan, D-Pa., introduced companion legislation in the House of Representatives. We must continue this momentum.

Empowering veteran-serving nonprofits in addition to state and local organizations to work together in the fight against veteran suicide will ensure that we reach more veterans with more effective services so that we can break the trend of veteran suicide.

Sen. John Boozman, R-Ark., has represented Arkansas in the U.S. Senate since 2011.

[Back to Top](#)

[6. Women Veterans / Homelessness / Benefits / Cemeteries](#)

6.1 - WSOC (ABC-9, Atlanta Journal-Constitution): [Community comes together to help 99-year-old World War II veteran facing eviction](#) (30 June, Jeremy Turley, 327k uvm; Charlotte, NC)

FORSYTH COUNTY, Ga. - Even though they are usually not the type of people to ask for help, Marian Rytkenon and her family needed a hand.

The 99-year-old World War II veteran was facing eviction from her nursing home after a trusted caretaker allegedly embezzled her life savings and payments she should have gotten from the Department of Veterans Affairs were stuck in bureaucratic limbo.

After connecting with Rytkenon's son via Facebook about a month ago, the Cumming-based Shadow Warrior Foundation and its president, Ryan Hepworth, felt they had to answer the family's call for help.

"Typically, veterans like her from the 'greatest generation' don't have to deal with this," Hepworth said. "She fell through the cracks."

During the war, Rytkenon served as a recruiter until 1945, when her husband's plane was shot down in France, Hepworth said. While her husband managed to survive the war, he was injured, and Rytkenon left the service to care for him.

Seventy-five years later, with her savings gone, Rytkenon tried to collect the VA benefits she never knew she was owed. They would have paid for her to remain in The Oaks nursing home in Cumming.

But more than eight months after Rytkenon applied for the benefits, Hepworth said the veteran still had not received any aid from the federal agency.

With a looming eviction date of July 15, Hepworth's organization and state Sen. Greg Dolezal, R-Cumming, banded together to create a Facebook fundraiser that would pay Rytkenon's living expenses until the VA benefits kick in.

Dolezal's post in the Focus on Forsyth County Ga. group generated more than \$3,000 in the first hour and more than \$9,000 overall. The lawmaker said the large number of donors, 196 in all, reveals the true generosity of his community.

"We all collectively remember D-Day and World War II. I've been reading about it lately and what the 'greatest generation' did for us," Dolezal said. "Generosity is a natural response to gratitude, and I think this reflects the gratitude we felt remembering D-Day" earlier this month.

The money raised will go directly to pay for Rytkenon's living expenses and should keep her at the nursing home for at least another two months, Hepworth said.

In the meantime, the organization and U.S. Rep. Rob Woodall, R-Lawrenceville, are working to expedite Rytkenon's benefits.

Both Hepworth and Dolezal said the veteran and her family were not the type of people to ask for help, but the dire situation called for it.

"I was beautifully stunned by the response. I thought it was audacious to do this for a person we had never met," Dolezal said. "This bridged all of the differences we may have."

[Back to Top](#)

6.2 - Staten Island Advance: [Smart home will be a life changer for veteran who changes lives](#) (30 June, Ann Marie Barron, 161k uvm; Staten Island, NY)

Michael Sulsona can reach deep into a broken war veteran's heart and find strength, determination and hope.

But reach the top shelf in a kitchen cabinet? That's been a challenge for the retired Marine Corps sergeant ever since the day he lost both of his legs to a land mine while serving in central Vietnam.

"At 67, I'm with the broomstick, trying to move things to the edge," Sulsona says with a laugh and an expletive, mocking his stubborn attempt at independence. He shares experiences like this, and encouragement, with veterans daily in his dual roles as a Marine Corps League service officer and an ambassador for the Stephen Siller Tunnel to Towers Foundation.

The cabinet reach, and most other everyday tasks, have been tough for Sulsona ever since that fateful day in 1971. Yet, on a daily basis, he counts on those experiences to guide and assist veterans facing similar challenges.

On July 2, he'll be on the receiving end of that particular brand of generosity when he and his wife, Frieda, are presented with a new, mortgage-free, entirely accessible smart home, courtesy of the Stephen Siller Tunnel to Towers Foundation.

The two-story New Dorp home features everything from widened doorways and a roll-in shower, to an elevator and motorized stovetop and kitchen cabinet shelves that drop down to his level for easier access.

It'll be a life-changer, he says.

"This is going to add years to my life," said Sulsona, who in recent months hasn't been able to access his second-floor bedroom in his Bulls Head townhouse because a poorly-designed chair lift and a shoulder injury have made it too difficult to board.

"I'll be able to live more productively," he said. "I'll be able to sleep in a bed."

It'll be the fourth home provided on Staten Island by the foundation, started by Frank Siller and his siblings in memory of their brother, Stephen, an off-duty New York City firefighter who was killed while responding to the World Trade Center on 9/11.

'YOUNGER GUYS LOOK UP TO HIM'

Sulsona's tough-as-nails persona, coupled with an intimate knowledge of the ins and outs of Veteran's Administration (VA) red tape, are what make him a priceless addition to the foundation, said John Ponte, the senior director of its Gold Star Family Home and Smart Home Program.

"He lives in that world," said Ponte. "He's been very, very positive, and the younger guys look up to him. They call him grandpa. He's just a wealth of knowledge."

Securing the services and support the VA provides involves a certain skill set, Ponte said. It's one Sulsona has mastered through the decades. "A lot of kids say, 'the VA doesn't do this for me, doesn't do that for me,' but there's a lot of self-initiative needed."

He doesn't coddle the vets he sets out to help, Ponte said. "He barks at them. He gets them moving. And there are times when he's screaming at the VA. It's his determination that makes it happen."

Over the past few years, his volunteer efforts haven't always been convenient -- or even safe. Some of his time is spent in offices opposite members of Congress, or addressing sponsors at fundraising dinners. Yet, reaching out directly to homeless veterans is often a bit less glamorous. Desolate subway stations. Cold, dark alleys. An emergency room on Christmas Eve. He's seen them all in his efforts to "build a bridge between vets and the VA."

"He gets in the car, no matter what time of day," Ponte said. "I tell him he's got to slow down a bit. When you see these cases and you listen to these people's problems, it affects you. It brings you down, too."

From social worker, to claims specialist and psychologist, to just an ear, listening on the other end of the telephone line -- Sulsona plays every role.

HIS DEDICATION AND A SPECIAL CHRISTMAS

He dropped everything in 2018 to head to Harlem at 2 a.m. and spent Christmas Eve in an emergency room, using diplomacy and a bit of grit to secure prescription medication for a homeless vet. Later, at a diner, he ate steak and eggs with the vet. It's one Christmas he'll always remember, he says.

He recalls his own return home from Vietnam, and a less-than-gracious welcome from his home community in downtown Brooklyn.

"I was asked not to vote," he said. "I was told to move my car (for parking too close to someone's driveway). My car was being keyed. These were my neighbors. I had artificial legs and I was parking blocks away."

Bitterness, by all accounts, has had no place in his life. "That was just the way things were," Sulsona says.

Rather than waste time on anger, he took his positive outlook to college, graduating with honors from Goddard College with an MFA in creative writing, then went on to write more than 23 plays, 18 screenplays and a handful of books as an untitled (ghost) writer.

He's grateful to Frank Siller for his example, and for allowing him to reach other veterans, he says. The rewards far outweigh anything he ever got from writing scripts, he says.

"Here, I actually touch somebody," he said. "You can help them make it to the next day. When you get that one person that no one cares about, and you change his life . . . What I've been exposed to is priceless. You can't buy it."

"Everything that I wanted to do in life, every dream that I had, the Siller Foundation has shown me that it's possible," Sulsona said. "They've changed my whole life by just showing me what I could do and allowing me to do it."

TRIBUTE TO SILLER

Siller's passion is unmatched, Sulsona said.

"If you cut Frank loose, he'd personally take care of every single first responder," Sulsona said. "And, he just about does."

He laughs that he made news for not being bitter with the VA, remembering a letter he wrote to the Advance five years ago when three Lowe's employees took it upon themselves to repair his broken wheelchair in the store after he'd waited many long months for a new one.

"The story went viral because I wasn't trashing anyone," he said with a chuckle. The incident led him to his Tunnel to Towers career, he said.

Ponte spotted the article and set out to give Sulsona a wheelchair the foundation had available. When Lowe's wouldn't provide Sulsona's contact information, he was briefly disheartened, only to spot Sulsona a few minutes later on the drive home.

"I just happened to glance out the window and I see this guy, rolling in a wheelchair," Ponte recalls. "I got so excited." After chatting with Sulsona for nearly an hour, and inviting him back to his home for a barbecue, he knew the Purple Heart, Bronze Star With Valor veteran could provide a great service to the Tunnel to Towers Foundation. Frank Siller was easily convinced, he recalled.

Sulsona never had a thought of getting anything for himself from the foundation, he said. His townhouse has been modified through the years and he'd gotten used to things the way they were.

Besides, the foundation's mission was to provide services to 9/11 families and veterans from the wars in Afghanistan and Iraq, not Vietnam.

That changed at a Veteran's Day event a few years back, when Fire Commissioner Sal Cassano asked Ponte, "Why aren't we building Mike a house?"

After about two years of battling New York City bureaucracy, that plan is coming to fruition.

Sulsona's house, at 52 DiMarco Place, will be unveiled to him and dedicated on July 2 at 11 a.m. in a ceremony open to the public.

Sulsona says the home will change everything.

"Considering the life that we've lived, for this to happen to both of us, we're still shaking our heads," he said.

He's seen a few smart homes before, but has not yet seen this one.

"You're able to move freely," he said. "You just roll into the house. There's actually room between the couch and loveseat. In the dining room, you can sit at any place. That's something I've never lived with."

The only downside to the new home, he says, is that he'll soon have access to the laundry room -- and his wife will expect him to pitch in with those chores.

"Thank you, Frank Siller," he says, sarcastically. "Thank you for that."

[Back to Top](#)

6.3 - The Topeka Capital-Journal: [Harry Colmery's niece recalls humility of World War I pilot, GI Bill...](#) (30 June, Tim Carpenter, 62k uvm; Topeka, KS)

Jean Colmery Roberts remembers well the late 1943 visit from her uncle at her apartment outside of Washington, D.C.

Her guest was Harry Colmery, who was weary from a long night composing on Mayflower Hotel stationary a draft of what evolved into the GI Bill of Rights.

"Harry called me after he had written all night for the GI Bill. He told me he used seven pens, I think," said Roberts, 99, and a resident of Charleroi, Pa. "He was tired. He was supposed to go on a fox hunt and didn't want to go, because he was too tired. He didn't want anyone to know where he was, so he stayed with my sister and me."

To mark the 75th anniversary of President Franklin Roosevelt's signing of the landmark law, the University of Pittsburgh documented in words and photographs memories shared by Roberts about her uncle's role in the visionary work supporting veterans.

Colmery, who died in 1979, was born in Braddock, Pa., and served as a first lieutenant and pilot in the U.S. Army Air Service during World War I. He had earned a law degree in 1916 at the University of Pittsburgh and began a legal career that brought him to Topeka in 1920.

He served in 1936 as national commander of the American Legion, which placed him in a position to advocate for veterans. He lived at the Mayflower Hotel in Washington from December 1943 through January 1944 while preparing the final draft of the GI Bill. He was assisted in the effort by American Legion members also eager to help military members reintegrate into society.

The congressional delegation in Kansas has launched a campaign to convince President Donald Trump to award the Presidential Medal of Freedom to Colmery for his role in carving a path for men and women transitioning from military to civilian life.

"As the father of the original GI Bill, Harry Colmery has helped facilitate the education and training of more than 20 million veterans," said U.S. Sen. Jerry Moran, R-Kan.

The Veterans Administration's hospital in Topeka has been named the Colmery-O'Neil VA Medical Center. A statue of Colmery was dedicated in Topeka three years ago.

In Colmery's presence, on June 22, 1944, President Franklin D. Roosevelt signed the GI Bill. An estimated 8 million surviving service members of World War II received educational benefits from what was originally called the Servicemen's Readjustment Act.

The law has been revised to include vocational rehabilitation and employment, home loans and health care benefits. In 2017, Trump signed the Colmery Veterans Educational Assistance Act, also referred to as the Forever GI Bill, to broaden educational elements of the program.

Aryanna Berringer, director of the University of Pittsburgh's Office of Veteran Services, was among veterans who personally drew upon the GI Bill. She grew up in poverty and at times wasn't certain where her next meal might emerge.

"When I joined the military, there was part of me knowing that I can get an education when I got out," said Berringer, an Iraq war veteran. "It's one of those things that can change the trajectory of the life of somebody like me. I was able to break the cycle of poverty, all due to the GI Bill."

Roberts, who was in her mid-20s when visited by Colmery during World War II, said her uncle was dedicated to bettering lives of people around him. She said he was an empathetic man convinced service members must be rewarded for sacrifices made on behalf of the country.

"He cared so much for his fellow man," she said. "He was a bright boy. He was dedicated, a hard worker, a deep thinker and a humble person in many respects."

She said Colmery would likely resist much of the attention he's received around the 75th anniversary of the GI Bill.

"He would be pleased, but he wouldn't want all of this," Roberts said. "He did everything in a very quiet way, and accomplished so much. You never knew what was going on in the background."

[Back to Top](#)

6.4 - Johnson City Press: [Giving credit to those who served in U.S. Nurse Cadet Corps](#)
(30 June, Robert Houk, 33k uvm; Johnson City, TN)

Agnes Lowe is on a mission. The retired nurse is asking Congress to recognize her and other former members of the U.S. Cadet Nurse Corps as veterans of World War II.

She doesn't want proclamations, medals or medical benefits from the U.S. Department of Veterans Affairs. Lowe simply wants nurse cadets given credit for their service to the country with an honorable discharge and veteran burial status.

"We have never been given veteran status," said Lowe, who was among the first to join the Cadet Nurses Corps when it was created in 1943. "We continue to be the only uniformed group that served during the war that has not been called veterans."

Lowe, 93, keeps photos and other memorabilia of her days in the corps in her apartment at Brookdale Senior Living in Johnson City. She speaks fondly of her time in the corps, and is often honored for her service at local events.

She was recently recognized at the Washington County Republican Party's Lincoln Day Dinner in Johnson City, and has been asked to participate in an event on Aug. 31 in Elizabethton to mark the 75th anniversary of D-Day.

"There are so many people who haven't heard of the Cadet Nurses Corps," Lowe said earlier this month. "There are veterans who haven't heard of us. I'm working hard to fix that."

Her friends and employees at Brookdale are lending a hand. Diane Savicky, the resident program director at the facility, said she and others are "doing what we can" to compile petitions to be sent to U.S. Rep. Phil Roe and to U.S. Sens. Lamar Alexander and Marsha Blackburn asking they support HR2056/SR997 granting veteran status to nurse cadets.

Answering The Call

Lowe grew up the youngest of seven children on a farm in Cocke County. One of her siblings was a nurse, and Lowe wanted to follow in her older sister's footsteps.

Many nurses, including Lowe's sister, joined the military during World War II. This created a serious shortage of nurses on the home front.

That's when President Franklin D. Roosevelt formed the U.S. Cadet Nurses Corps. Lowe said she was "one of the 130,000 women who answered the call."

The corps paid cadets \$115 a month to help cover the cost of their uniforms and books, and required participants to enlist in military service once their training was completed.

The last six months of their training were to be spent in an Army or a Veterans Administration hospital. Lowe was among the 30 who chose the Mountain Home VA facility in Johnson City to complete their nursing education. While there she met her first husband, Finley Penick, a Navy veteran.

Senior cadets were responsible for nearly 80 percent of the nursing care delivered on the home front.

Lowe went to Fort Sanders Hospital in Knoxville after her stint at the VA to complete her cadet service. The war ended before her graduation, and Lowe was no longer obligated to join the military.

Lowe continued to work in the nursing profession for more than 40 years. Some of that time was spent as a private duty nurse after her husband was killed in a traffic accident, leaving her with two young children to support.

Lowe later remarried and put her nursing experience to use at the Department of Veterans Affairs Hospital at Mountain Home, where she retired in 1986 after working for 22 years.

Reaching Out To Congress

Lowe has contacted Tennessee's delegation in Congress to ask for their support of legislation to give nurse cadets their due. She said the feedback she's received from their offices has not been as encouraging as she hoped.

"We'll just keep working on it," Lowe said of the bill, noting the American Nurses Association and Veterans of Foreign Wars are two prominent national organizations supporting it.

When reached by the Press, Alexander's office responded the state's senior senator "looks forward to reviewing the legislation" when it clears the Senate Committee on Veterans' Affairs.

Likewise, Blackburn's office stated she also "looks forward to reviewing it in-depth" as a member of the Senate Committee on Veterans' Affairs.

Roe's office released a statement from the 1st District congressman pointing out the U.S. Nurse Cadet Corps "served an incredibly valuable role while World War II was raging on, helping to ensure that U.S. civilian health care needs were met until the war's end."

He also said: "There is a process already established for groups receiving veteran status, and I think that is the proper way for groups to apply for veteran status. Should the majority bring this legislation forward, I look forward to learning more about their eligibility for veteran status."

Roe's office in Kingsport can be reached by phone at 247-8161, or by email by going to his website at roe.house.gov.

Alexander's field office in Blountville can be reached by phone at 325-6240, or by email by going to his website at alexander.senate.gov.

Blackburn's field office in Jonesborough can be reached by phone at 753-4009, or by email by going to her website at blackburn.senate.gov.

[Back to Top](#)

6.5 - Observer-Reporter: [VetFest bring services to Wild Things Park](#) (30 June, Scott Beveridge, 24k uvm; Washington, PA)

Iraq War veteran John Corl said he bounced around homeless shelters until he sought services from the Wounded Warrior Project in Pittsburgh.

The Green Tree man said getting help for his service-related issues brought him to the point where he's now ready to enroll in college and gain employment.

"Wounded Warrior helped me," Corl said Saturday at VetFest at Wild Things Park in North Franklin Township.

He said veterans services "got me back on my feet."

VetFest, a project of Wounded Warrior, brought numerous vendors that offer services to veterans Saturday to Washington County because it is a midway point between Pittsburgh and Wheeling and Morgantown in West Virginia, said Shawn Seguin, an outreach specialist with the project.

"It's an amazing location, Seguin said. "This area loves veterans. They treat them right."

He said about 300 people were expected to visit the festival, where a band performed and vendors reached out to veterans with services ranging from suicide prevention to employers that are hiring.

Representatives from the Veterans Affairs' new outpatient clinic in Washington were there to guide people to local health care so they don't have to find transportation to Pittsburgh.

"We've had quite a few people," said Maureen Griffin, a social worker at the clinic at 95 W. Beau St.

Veterans who are enrolled in the VA can receive a wide range of services in Washington, including suicide prevention, post-traumatic stress treatment and physical examinations.

Saturday's event also included classes where veterans were taught how to prepare résumés and "sell yourself to a company," Seguin said.

He said Pennsylvania has the third highest number of veterans of the National Guard in the nation, and many of them need housing or mental health services.

"We went big," he said.

[Back to Top](#)

6.6 - The Indiana Gazette: [Indiana County VA director set to retire](#) (30 June, Chauncey Ross, 16k uvm; Indiana, PA)

For better and worse, technology and bureaucracy have provided some of the biggest changes in service to American military veterans over the past four decades.

For all the ups and downs assured by 44 years in one job, and for what the cliché of a rollercoaster ride could too easily be applied, heading Indiana County's Veterans Affairs office been a trip that Brenda Stormer said she never wanted to end.

Stormer has six weeks to prepare. She announced her retirement effective Aug. 9 in a resignation notice turned in this past week at the county courthouse.

Gone will be the highs, the victories in getting benefits approved in tough cases for aging soldiers. Gone will be the lows, the times of watching veterans die impoverished while bureaucrats sat on their benefit applications.

The Indiana County Salary Board on Tuesday accepted Stormer's retirement, with regret.

Stormer regrets it too.

Not because of the changes in rules and regulations handed down from Washington that she, and in turn Indiana County's soldiers and sailors, have no choice but to abide.

The camaraderie that drew Stormer to the office in January 1975 and kept her there through the years is what nearly kept her from leaving.

"I'm going to miss this place. I'll miss the people — I love my vets. You build up a relationship through the years with these guys and it's going to be tough. But it's time. It's time."

She has two months to change her mind. But it could be a change that grows on her, like the day when, at age 21, she first walked into the Veterans Affairs office.

"I remember that day. I was so scared!" Stormer said.

She was a clerk. Over 20 some years, she advanced to secretary, then administrative assistant. Over those years, instead of migrating to other opportunities for more money and higher ranks, Stormer stayed on as the ensign to Ronald Buterbaugh, himself a legendary general among courthouse office bosses.

Buterbaugh worked 47 years there, including 41 years as the director.

Stormer took his desk when Buterbaugh retired in 1997.

"Mr. Buterbaugh. That's who my teacher was. That's who I learned from," she said.

Stormer never wore a uniform but had the respect of those who did.

She brought the familiarity of a sister of a national guardsman, the sister of a soldier, the wife of a Vietnam War army veteran.

"I enjoyed working for the vets. The pay has never been great but it's was never about money, it's been about helping people and doing the right thing for people," Stormer said.

Computers and the internet have replaced typewriters and paper since 1975. The Veterans Administration medical centers have gotten bigger, the clinics and transportation programs have improved, she said. And on the whole, at least on paper, veterans have it better today.

"Better than in 1975, I can guarantee you," Stormer said. Medical benefits, claims, money and disability services have all increased.

Stormer relished those changes. But she has anguished, especially in the past two years, over the government's stalling on veterans benefits.

"They're now taking six to eight months to get claims through. We have people dying before their claims go through, especially aid and attendance, widows in nursing homes, veterans in nursing homes," Stormer said. "It is very frustrating. Probably a year ago we were getting these claims back in two to three months. Now it's six to eight months. I can't — it's hard to even deal with."

"It used to be that if someone had a money issue, was in hospice or their condition was terminal, we used to call and say 'hey, can you rush this claim?'" Stormer said. "They do nothing to help us anymore.

"The V.A. changed their whole system in November. It used to be a four- or five-page application, now it's a 25-page application and that's part of the problem."

But having no change for special consideration of special circumstances bothers Stormer the most, she said.

"If someone is in a nursing home, they need money to stay there, and their kids and family are trying to pay that bill — they won't even budge on it," Stormer said. "That's money that they're owed. And that's the worst part of it. A claim is forever anymore.

"Unacceptable, as far as I'm concerned."

The rewards, however, have been plentiful too.

She worked with the last of Indiana County's World War I veterans, and remembered when the last known doughboy died.

There have been thousands of World War II servicemen, thousand who went to Korea and thousands more Vietnam veterans. And until there's any surge of claims from Gulf War veterans and all those who have been deployed since 9/11, Stormer said, most of the veterans through her doors still are those who fought in Southeast Asia — a lot affected by Agent Orange.

"It's all the thank yous people come in and give you," she said. "Or the hugs! Or the letters you get in the mail.

"And we have had huge awards through our office for Agent Orange (claims). We have had awards like \$500,000 or \$750,000. We worked and worked and worked and worked on those claims, and when they finally get it, it's like 'Yesss!'" Stormer said.

For the best and worst of what the V.A. can do or does, Stormer said, her parting advice is for veterans to visit the office. It's on the second floor of the courthouse.

"They need to get registered with the V.A., and register with the V.A. hospitals. You only have a certain amount of time to do that," Stormer said. "Get in touch with your county director. Get your discharge recorded like you're supposed to. And keep in touch because there are other benefits."

Getting in the office and getting their claims filed should get them something, someday. Not coming in and not filing will guarantee them nothing, she said.

"I've been blessed to have this job and be able to help as many people as I have through the years. It's very rewarding," Stormer said. "And I have to say I've had awesome groups of commissioners. I've been here 44 years; I have never had a commissioner that gave me a hard time.

"They will ask you things that they need to ask you, but they have pretty much let us run the office, do what we needed to do. And if I needed anything, they have always been very

supportive. Always have. And I have been really, really lucky, because in a lot of counties, it doesn't run like that."

As members of the salary board, the Indiana County Commissioners on Tuesday shared the sentiment.

"Obviously she's been a strong advocate for veterans in Indiana County. In 44 years, she has touched a lot of veterans, and their families," Commissioner Rod Ruddock said. "She will be a missed supervisor here."

"She has been a fixture in that office for a very long time and has done an outstanding job for our veterans, so it's with very much regret that we accept her retirement," Commissioner Mike Baker said.

The commissioners didn't indicate a timeline for appointing a successor to Stormer as director of veterans' affairs.

[Back to Top](#)

6.7 - The Daily Independent: [Court program gives veterans second chance](#) (30 June, Carly Carver, Ashland, KY)

CATLETTSBURG – A United State Marine has a chance at a fresh start thanks to hard work and a specialized court program led by circuit court judges in conjunction with the VA.

Veterans Court assists veterans in need.

James "Jim" Blankenship, a United States Marine Corps veteran, graduated from Boyd County Circuit Court's Veterans Court Program on Thursday, with all criminal charges being dismissed and diverted.

Blankenship was originally charged with trafficking in a controlled substance but graduated Veterans Court after being enrolled since last year and successfully meeting all requirements with no complications or setbacks.

"It gives me great pleasure to enter an order this afternoon that dismisses the criminal charges against Mr. Blankenship, dismissed due to his participation and completion of the Veterans Court program," Boyd County Circuit Judge John Vincent said. "Congratulations, we're very, very proud."

Blankenship, who served as an infantry marine from 1993 to 1996, said that the judges and Veterans Court allowed him a new opportunity in his life.

"I just wanted to thank everyone here," Blankenship said. "Thank you to my family."

The courtroom was filled with supporters from the VA, court staff, along with several members of Blankenship's family and friends.

"You all won't be seeing me again," Blankenship said with a smile to the judges.

Veterans Court is an outreach program that is affiliated with the VA Medical Center, and is officially called the Veterans Justice Outreach Program, Vincent said.

"It's designed to work with local justice system partners to identify veterans that enter the justice system and are in need of treatment services rather than incarceration," Vincent said.

Angela Miller, Veterans Justice Outreach Specialist with the VA Medical Center, said the program aims to help those with criminal charges work on appropriate treatment, not just incarceration, and treat the deeper root issue.

"Every veteran gets an assessment, and those who are a good fit for veterans court gets treatment," Miller said. "We link them to the appropriate service for the underlying issue."

"This is our first graduation during the calendar year 2019," Vincent said. "We're very proud in Boyd County to continue in this program. We have it and we are even now receiving referrals from other counties to allow us to process those eligible for Veterans Court in our system."

Miller said that after receiving a referral for Blankenship in July 2018, he was then admitted to the program in September 2018.

"We're very proud of him," Miller said. "He's someone who was absolutely devoted to working on the treatment team's recommendations. Someone who actively engaged. He actively participated in all the things they asked him to do. He was fully engaged, fully committed and graduated without any sanctions or restarts."

"It's pretty intense, it made me take a long hard look at myself," Blankenship said. "I have a great family and a huge support group. I couldn't have done it without them."

Blankenship said he attended weekly meetings, therapies, and multiple other requirements of the court to graduate.

VA Medical Center Director Brian Nimmo attended to support Blankenship.

"On behalf of the Department of Veteran's Affairs we wanted to congratulate you," Nimmo said. "Hoorah!"

"Semper Fi!" Blankenship said.

Vincent said that the "father" of the Veterans Court Program is Boyd County Circuit Judge George Davis.

"Judge Davis was instrumental in working with Supreme Court Justice Will T. Scott in bringing this program to Boyd County," Vincent said. "We owe him a gratitude of thanks because a nation should always cherish their veterans and this program allows us to act that way for our citizens in Boyd County."

"I'd like to commend Judge Vincent for presiding over Veterans Court in this division, he stepped up and he has a passion for those who served our country," Davis said. Davis said that when the program started there was no funding, so Veterans Court operates solely through the Veterans Administration and has no expense to the taxpayers.

"Your honors, I wanted to express our appreciations to you, thank you for supporting our veterans," Nimmo said. "We couldn't be more proud. This really takes a team."

"While you're here Mr. Director I want to acknowledge the tremendous job your staff does," Vincent said.

For more information on the Veterans Justice Outreach Program, contact Miller at (304) 429-6755 ext. 4622 or at angela.miller11@va.gov.

[Back to Top](#)

7. [Other](#)

7.1 - The Daily Caller: [Hassan Likely Didn't Notify Constituents Whose Data May Have Been Exposed, Despite Pushing Law Requiring It For Companies](#) (30 June, Luke Rosiak, 3.9M uvm; Washington, DC)

Sen. Maggie Hassan's computer system was hacked in what prosecutors called the "largest data theft in Senate history," yet there is no evidence she informed constituents who may be at risk of identity theft as a result — despite being one of the most vocal advocates for laws requiring hacking victims to do just that.

The New Hampshire Democrat's former IT aide Jackson Cosko was sentenced to four years in prison June 19 for pilfering essentially all the office's data by paying another Hassan staffer to help him break into the office late at night.

One of Hassan's key issues in the Senate has been requiring companies to notify Americans whose personal information they fail to protect. Hassan sponsored a federal law to that end, but it has not passed.

A 2006 New Hampshire law enacted while Hassan was a state legislator requires "any person doing business in this state" to notify anyone whose private data they possess if their systems are hacked, exposing individuals' data such as social security numbers. It is a crime to knowingly disregard the statute.

Constituents who came to Hassan for help called it a betrayal, while a government ethics expert said it was profound hypocrisy.

"What about all the data that was hijacked belonging to her constituents? This was an extensive theft of personal data. She should inform the victims of just what information was breached," said Tom Anderson, a government ethics expert with the National Legal and Policy Center.

Like any senator's office, Hassan's office has the private information of huge numbers of constituents who seek help dealing with federal agencies. The topics are often personal issues such as social security payments, Medicare health issues, and immigration issues.

D.C.-based staff were also affected by the breach, and Virginia also has a similar law with text noting it applies to government entities, too.

Hassan herself has noted that on top of complying with the law to avoid penalties, companies have a moral obligation to protect Americans who trusted them with their data.

"There are state-by-state laws requiring private and public entities to notify individuals when there are security breaches of their personal identifying information. These laws represent the lowest amount of communication required. I'm interested in what companies are proactively doing," she told Equifax's CEO in November 2017.

A Hassan staffer caught Cosko in the act Oct. 2, 2018. Cosko tried to extort the witness into silence, according to his plea deal.

"I own EVERYTHING," he said, rattling off sensitive data. "If you tell anyone I will leak it all."

Eight days later, on Oct. 10, Hassan railed against Google for not informing people when it discovered a bug in the Google+ API that could potentially leak users' information.

"It is really concerning to me that an incident affecting this many people didn't have to be disclosed publicly," Hassan said. "This incident further highlights the need for a closer look at how we might structure data breach notification in federal legislation."

Hassan's office provided no evidence to the Daily Caller News Foundation that it had disclosed its own breach, and several New Hampshire residents who had communicated with Hassan's office told the DCNF they had not received any notification that their information could be in the hands of bad actors. Records showing Senate offices' mailings to constituents show none from Hassan.

Digital consumer protection laws require that companies notify victims when their data is breached if the data includes certain sensitive fields, such as Social Security numbers or drivers licenses. When constituents ask Hassan for help with a problem, she has them fill out a privacy waiver form that requires them to give her their SSN.

Constituents burned

Peter J. Gonsalves Jr., a New Hampshire veteran who said he has a master's degree in public administration, said he went to Hassan's office desperately seeking help after he faced homelessness following problems with the Department of Veterans Affairs.

Hassan's office has "medical and personal info on me and they have never told me about any breach," he told the DCNF. The apparent breach was a blow to someone who was already down.

"I suffer from depression. The VA and the government have destroyed my life," he said.

Tony Woody, a New Hampshire veteran who has blown the whistle about problems at the Manchester VA medical facility, which subsequently became the focus of national news coverage and of federal probes, said he provided evidence about VA wrongdoing that, if leaked, could put him at risk of retaliation.

"That could be me. But I don't know since I've never heard anything," he said of the group of people affected by the breach. "Maggie got copies of all my evidence. I don't want that coming out. There was medical stuff in there, personal stuff. She's going to have to answer some really hard questions."

He said Hassan was sloppy.

"He was already a convicted felon when she hired him? Why would she do that? This is IT in the U.S. Senate. What is wrong with people?"

[...]

[Back to Top](#)

7.2 - National Catholic Register: [After Amputation, Student Turns to Football — and Faith](#)
(30 June, Stephen Beale, 321k uvm; Irondale, AL)

At first they thought they were bone cysts.

Sebastian Bonaiuto, then an eighth-grader heading into high school, was having trouble with his left ankle, and his foot was getting swollen. In August 2016, he had a surgery to remove what doctors believed was a cyst in his left heel bone. A second surgery occurred one month later.

But Sebastian was still having issues with his foot in October, leading to a third surgery in November 2016.

That's when a test turned up the real problem: Sebastian had osteosarcoma, a type of bone cancer.

"I was pretty scared, obviously," Sebastian said.

It wasn't the first time the family had heard that kind of a diagnosis.

In 2008, his mother, Jessica, was diagnosed with breast cancer. She died in 2011.

"It was incredibly scary. It was devastating for me to hear the diagnosis," said Dominic Bonaiuto, Sebastian's father. "The thought crept into the back of my mind that I can't believe that we might have to be dealing with this again."

Instead of chemotherapy, Sebastian would need another surgery. This time it would be an amputation of his left foot at the ankle. "It was a bit of a gut punch," Dominic said.

A Good Sport

After a successful surgery in March 2017, Sebastian turned his attention from surviving the cancer to moving past the amputation. For Sebastian that meant getting back into sports — especially football. "At first I was a little bit worried. I'm pretty athletic, so I was worried I wasn't going to be able to play sports, but then I kind of just decided I'm not going to let this stop me. I'm going to continue playing sports," Sebastian said.

Before the surgery, Sebastian met with John Hattingh, a prosthetist and the owner of the Prosthetic Care Facility of Virginia. Hattingh asked Sebastian what he wanted to do when he recovered. The first thing he said was that he wanted to play football — and Hattingh pledged to help him do it.

Hattingh's facility fitted Sebastian with his first prosthesis in May 2017. Two more prostheses followed, with the final one completed in May 2018. The last one was a combination of a blade with a heel component that gave Sebastian both agility and stability, allowing him to play football, according to Hattingh.

Thanks to his prosthetic foot, Sebastian was able to get back into sports at Thomas Edison High School in Alexandria, Virginia. In the spring of 2018, he joined the track team, where he threw discus and shot put. In the summer of 2018, he participated in a recreational swim league. Finally, this past fall, as he entered his junior year, Sebastian began playing for the varsity football team as the long snapper.

"The remarkable aspect of this success story is really the amount of time and grit that this young man had to re-applicate himself to use a prosthesis to the maximum of the prosthetic's ability," Hattingh said.

Love Foots the Bill

Hattingh's facility, which is family owned and operated, also donated a prosthetic fin, which helped Sebastian to swim. (The total value of the donation was \$17,000. The facility also contributed a \$7,000 upgrade to his prosthesis.)

"This kid is phenomenal. I can't do enough for this kid because everything I give him he just turns it into a miracle," Hattingh said.

Over the course of his recovery, the Bonaiutos relied on the support of both communities at the two parishes they attend — Our Lady, Queen of Peace in Arlington and St. Bernadette in Springfield.

Father Joseph Chacko, a chaplain who has counseled veterans who have had amputations, said losing a limb can be a form of death. There is a certain emptiness that follows.

But the meaning of that emptiness is transformed by the reality of Jesus' empty tomb. "At the time of Jesus' resurrection, the empty tomb was a symbol of hope for the disciples, whereas, for some other people — Jesus' opponents — it's a symbol of fear," said Father Chacko, who works at the James A. Haley V.A. Medical Center.

In Scripture, fear is associated with darkness, while light symbolizes trust and hope in God's love. That light, Father Chacko said, comes through faith. "The people of faith ... trust in the Lord. So the faith dispels the darkness," Father Chacko said.

Sebastian has found this truth in his own journey.

Steps of Faith

Sebastian, now 16, also relied on his personal faith in God. "I really found strength through my faith. I prayed on it a lot," Sebastian said.

"I really believe that everything happens for a reason. God's got a plan for everybody, and I guess this is my plan," Sebastian said. "No matter what you're dealing with, just make the best of it. That's what I've always done. I've always looked for the positive in everything I was doing."

Father Chacko encourages veterans to have a similar mindset. For those who are going through loss and grief, he suggests a three-step process of acknowledging the loss, seeing what remains and looking for what's possible under the current circumstances. "I tell people: Every crisis is an opportunity. So it can be a stumbling block or it can be an opportunity for a stepping stone," he said.

Sebastian has already had the opportunity to step out and give back. He has spoken at a dinner for sarcoma survivors and recently visited a hospital where he offered advice to a girl who had undergone a similar amputation. He has also run a 5K to benefit for the Inova Children's Hospital, where Sebastian also had his surgeries.

Sebastian is thinking of ways he can give back in the future – and as a junior he is already scoping out colleges that will help him achieve his plan. Sebastian once wanted to be an engineer, and now, after his experience, he has narrowed his interest to the field of prosthetics. In fact, Sebastian even assisted in constructing the last two prosthetic feet he received, according to his father, helping out in the cutting and lamination process for each.

Bonaiuto, who works in government and community relations for the Inova hospital system, says he's "incredibly" proud of all that his son has done. "You couldn't ask for more," he said.

He says he hopes his son's story inspires others going through struggles. "I hope people would know that everyone does have their own inner strength. Hopefully they have the faith to rely upon that and draw upon their own faith and their own community for strength and that inspiration when they feel times are most difficult," Bonaiuto said. "No one goes through anything like this alone."

[Back to Top](#)

From: (b)(6) [JJCUS]
Sent: 1 Jul 2019 18:20:58 +0000
To: Scher, Deborah L.
Cc: (b)(6) [SCGUS]; Richter, Melinda [JRDUS]; (b)(6) [JRDUS]
Subject: [EXTERNAL] FW: Partnership Slide Deck
Attachments: JLABS VA Collaboration Opportunity_FINAL.pdf

Apologies, sending once more.

From: (b)(6) [JJCUS]
Sent: Monday, July 01, 2019 2:01 PM
To: deborah.sher@va.gov
Cc: (b)(6) [SCGUS]; (b)(6)@its.jnj.com>; Richter, Melinda [JRDUS]; (b)(6)@its.jnj.com>; (b)(6) [JRDUS]; (b)(6)@its.jnj.com>
Subject: Partnership Slide Deck

Deborah,

Apologies for not mentioning this earlier. (b)(6) also completed a draft slide deck summarizing the potential VA-JLabs partnership, as discussed in New York. Understanding that there is a lot of foundational work still to do, I wanted to make sure you had this so we could start incorporating feedback from you and your team whenever you are ready.

Many thanks,

(b)(6)
MD, PhD

Vice President, External Innovation, Global Leader for Regulatory Science, and Executive Director of Scientific Partnerships for JLABS @ Washington, DC



Office: (b)(6) Cell: (b)(6) Email: (b)(6)@its.jnj.com

1350 I (Eye) Street, Suite 1250, NW, Washington, DC 20005

Executive Assistant: (b)(6)

Office: (b)(6) Cell: (b)(6) Email: [mailto:\(b\)\(6\)@its.jnj.com](mailto:(b)(6)@its.jnj.com)

From: (b)(6) [SCGUS]
Sent: 31 Jul 2019 12:31:14 +0000
To: Scher, Deborah L.
Subject: [EXTERNAL] Fwd: VA/DoD Suicide Prevention Conference
Attachments: 2019 Banquet Menus.pdf, ATT00001.htm, Partnership - offset costs sheet.docx, ATT00002.htm

Deborah

Can you connect with Wendy regarding our discussion yesterday when you get a chance?

Sent from my iPhone

(b)(6)
Johnson & Johnson Healthcare Systems
Field Director Federal Team/ Strategic Engagement
(b)(6)
(b)(6) @its.jnj.com

Begin forwarded message:

From: "Lakso, Wendy" <Wendy.Lakso@va.gov>
Date: July 31, 2019 at 7:40:20 AM EDT
To: "(b)(6) @its.jnj.com" (b)(6) @its.jnj.com>
Subject: [EXTERNAL] VA/DoD Suicide Prevention Conference

Good morning (b)(6)

I am circling back to see the interest of Johnson and Johnson's support to the VA/DoD Suicide Prevention Conference. We are finalizing plans. Below are a list items/events we are hoping for partnership support (the banquet menu is attached):

1. **Reception Wednesday August 28th** evening during poster presentation: Menu attached - the carving stations are between \$16-\$23 per person (page 18 for reference) and could be accompanied by some hors d'oeuvre stations that range anywhere from \$7.50 per piece to \$27 per person (see pages 14 & 17 for these).
2. **Registration Wall Cling Graphics:** Freeman Wall Cling graphics and labor to install and remove: \$2,220.15 and \$2,808.15.
3. **Rental Space for two pole banners**
\$150.00 Per pole-total of
\$300.00
4. **Draping for Exhibitor space**
Total (taxes not included) \$3,506.00
5. **Additional cost for GS room Set up**
Difference of
\$3938.10

- 6. Rigging for all conference signs - four conference banners**

\$4000.00 total

- 7. Breakfast/Coffee/Tea-grab and go tables**

Gaylord Banquets-see attached pricing guide

Thank you very much for your willingness to help with the VA and DoD Suicide Prevention Conference.

Wendy

Wendy Lakso

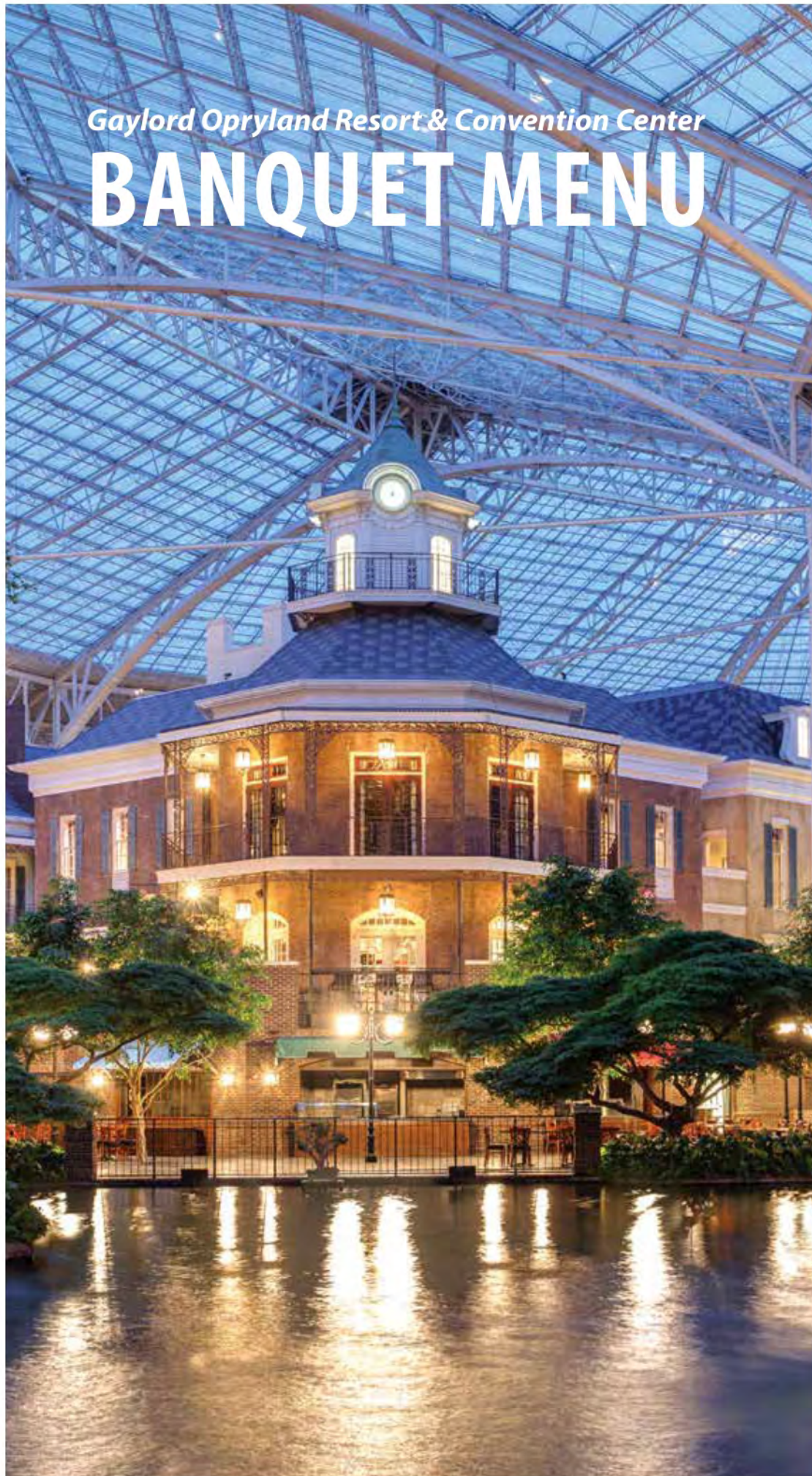
Deputy Executive Director, PREVENTS Executive Order 13861

Department of Veterans Affairs

Cell: (202) 794-3478

Gaylord Opryland Resort & Convention Center

BANQUET MENU



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WELCOME

Our 3,000 Gaylord Opryland STARS — each uniquely trained in their craft — stand ready, willing and able to ensure a flawless banquet experience for your distinguished guests.

The team consists of creative catering professionals, passionate culinarians, sommeliers, floral designers as well as eager banquet servers, conference set-up and stewarding STARS — all working together to deliver your vision.

Our mission is clear. Each event is individually designed to accomplish your goals and encompass our passions. Gaylord Hotels' entrepreneurial approach to every event, specifically here at Gaylord Opryland, has garnered rave reviews from clients for many years and continues to resonate loudly through the convention industry.

One of our highest distinctions includes being among Meetings and Conventions magazine's Gold Award Hall of Fame inductees, as well as recognition with the magazine's Gold Platter 'Elite' Award, which is given to the top five outstanding catering departments worldwide.

We view each plate, each cocktail and each gesture as the key to our success and a signature difference in creating incredible food, beverage and service experiences for our guests.

Please use this menu resource as a baseline for the talent at your disposal.

Sincerely,

Matt Foreman

Executive Chef



BREAKFAST | CONTINENTAL *(priced per person)*

All of our breads, pastries and muffins are baked on-site every morning. All continental breakfasts are served with freshly brewed coffee and an assortment of tea, orange juice and cranberry juice.

Continental Breakfast | 34.

Fresh-cut fruit

Assorted cereals, including gluten-free option, with whole, 2% and skim milk

Dannon yogurts

House-made granola

Fresh from our bakery: Daily assortment of muffins and croissants

Served with sweet butter, wild flower honey and preserves

Enhanced Continental Breakfast | 38.

Steel-cut oats with brown sugar, raisins, fresh berries and walnuts

Fresh-cut fruit

Assorted cereals including gluten-free option, with whole, 2% and skim milk

Dannon Yogurts

Fresh from our bakery: Daily assortment of muffins and croissants

Choice of one:

Brioche French toast bread pudding with warm syrup, cinnamon rolls or sticky buns

Served with whipped Opryland honey butter and preserves

Additional Offerings

Upgrade your Continental Breakfast

(priced per person)

Breakfast Burrito | 6.

Scrambled eggs, pepper jack cheese and chorizo-stuffed burritos with enchilada sauce

Served with fire-roasted salsa and guacamole cr ma

Croissant Sandwich | 7.

Scrambled egg, hickory-smoked bacon and buttermilk cheddar

Tennessee Hand Pie | 8.

Biscuit dough stuffed with ground pork and country gravy

The Jersey Sandwich | 7.

Pork roll, fried egg, farm house cheddar on a roll

Light Breakfast Sandwich | 7.

Egg white, smoked salmon, low-fat mozzarella, dill-caper cream cheese, multigrain English muffins

Greek Yogurt Mason Jar Parfait | 7.

Select Two:

- Freeze-dried raspberry and raspberry jam
- Blueberry, chia seed
- Blackberry, almond
- Caramelized banana
- Strawberry, house-made granola
- Cinnamon apple

BREAKFAST | BUFFET *(priced per person)*

All of our breads, pastries and muffins are baked on-site every morning. Breakfast buffets include freshly brewed coffee and an assortment of tea, orange juice and cranberry juice.

Breakfast Buffet | 45.

Steel-cut oats with brown sugar, raisins, fresh berries and pecans

Fresh-cut fruit

Fresh from our bakery: Daily assortment of muffins and croissants

Pick One Scramble:

Traditional Scramble

Cage-free scrambled eggs with cheddar

Southern Scramble

Cage-free eggs and egg white scramble with assorted hot sauces, green tomato, chow-chow and buttermilk cheddar

Huevos Rancheros

Tomato chili sauce, guacamole, black bean and charred corn salsa, Monterey Jack cheese and flour tortillas

Buffet Accompaniments

Select from each of the following groups:

Select One:

- Dannon yogurt
- Assorted cereals, including gluten-free option, with whole, 2% and skim milk

Select One:

- Hash brown casserole
- Oven-roasted red bliss potatoes with bell peppers
- Sweet potato and fingerling potato hash

Select Two:

- Smoked brisket hash
- Canadian bacon
- Hickory-smoked bacon
- Country link sausage
- Apple chicken sausage

BREAKFAST | BUFFET ENHANCEMENTS

(priced per person)

Additional Offerings

Upgrade your Breakfast Buffet

House-Made Granola | 5.

Fresh berries with whole, 2% and skim milk

Anson Mills Shrimp and Grits Bar | 8.

Savory grits with smoked Gouda and shrimp

Deep-Dish Pancakes | 8.

Served with warm maple syrup

Choose One:

- Blueberry granola
- Cranberry apple

Belgian Waffles | 8.

Fruit compote, whipped honey butter, whipped cream and warm maple syrup

Omelet Station | 12. *Requires attendant*

Cage-free whole eggs, egg beaters, egg whites

Ham, mushrooms, peppers, onions, tomatoes, bacon, cheddar, Swiss and Jack cheese

Individual Overnight Oats | 6.

Select two:

- Banana and maple syrup
- Citrus and honey
- Strawberry and basil

Vegetable Frittata | 7.

Feta, sundried tomatoes and almond pesto

Southern Strata | 8.

Country ham, mushroom, potato and asparagus

Sweet Scones | 7.

Blueberry, apple cinnamon and citrus with lemon curd, clotted cream and honey butter

House-Smoked Salmon Display | 10.

Naan bread, diced hard cooked eggs, red onion and capers

Individual Breakfast Eggs Baked in Puff Pastry | 7.

Choose One:

- Tomatoes, mozzarella cheese and fresh basil
- Smoked bacon and cheddar cheese

Quinoa Breakfast Risotto | 10.

Almond milk, dried cranberries and toasted flax seeds

BREAKFAST | PLATED *(priced per person)*

All plated breakfasts include orange juice served tableside, bake shop specialties, freshly brewed coffee and assorted tea.

Plated Accompaniments

Preset on table

Choose One:

- Seasonal fresh fruit
- Macerated berries with whipped mascarpone
- Greek yogurt parfait with fresh berries and house-made granola

Specialty Entrées

Select one specialty entrée:

Southern Egg Scramble | 34.

Local buttermilk cheddar scramble with green tomato salsa

Breakfast Burrito | 34.

Scrambled eggs, pepper jack cheese and chorizo topped with red sauce, house-made salsa and avocado crème

Protein Power | 34.

Crustless egg white frittata with spinach, low fat mozzarella and roasted Roma tomato

Deep-Dish Pancake | 34.

Blueberry granola and deep-dish pancake with warm maple syrup

Breakfast Salad | 33.

Chopped kale, avocado, citrus segments, soft boiled egg and apple cider vinaigrette

Plated Accompaniments

Select from each of the following groups:

Choose One:

- Canadian bacon
- Chicken-apple sausage
- Country link sausage
- Crisp bacon

Choose One:

- White cheddar grits
- Sweet potato hash
- Oven-roasted red bliss potatoes

BREAKS *(priced per person)*

Breaks are designed for a 30-minute or 1-hour service period.

All-Day Beverage Break | 42. 8:30am - 5:00pm
Freshly brewed coffee, assorted tea, soft drinks and bottled water

Hit the Trail 30 minutes 19. | 1 hour 29.

Whole fruit; build-your-own trail mix: honey-roasted cashews, tamari almonds, peanuts, chocolate-covered pretzels, black bean sticks, granola, dried fruit and dark chocolate bark; infused cucumber-orange water

Music City Break 30 minutes 19. | 1 hour 29.
Candied bacon, deviled eggs, Goo-Goo Cluster parfaits, Moon Pie parfaits and seasonal sweet tea

Ball Park 30 minutes 19. | 1 hour 29.
Nathan's all-beef mini hot dogs with mustard, freshly popped popcorn with cheddar cheese and spicy barbecue salt, bags of peanuts, Cracker Jacks and raspberry lemonade

Pretzel Break 30 minutes 18. | 1 hour 28.
Bavarian pretzel sticks, beer cheddar stuffed pretzels, salted caramel stuffed pretzels, grain mustard and dill pickle dip, Hank's root beer

Banana Break 30 minutes 17. | 1 hour 27.
Whole bananas, banana trail mix, banana mini muffins, banana cream pie and banana smoothie

Coffee & Doughnut Break 30 minutes 19. | 1 hour 29.
Assorted glazed, filled and cake doughnuts with house coffee, flavored syrups, and rock candy sugar

The All-Natural 30 minutes 20. | 1 hour 29.
Individual bags of veggie chips and pita chips, Babybel cheeses with sun-dried tomato hummus, lemon-garlic hummus, mason jar fruit cups and CQ Lemon Water

Adrenaline Break 30 minutes 19. | 1 hour 29.
Kind Bars, Cliff Bars, chocolate-covered coffee beans and mixed nuts and Rock STAR energy drinks

AM Bake Shop Break 30 minutes 17. | 1 hour 27.
Banana bread, cinnamon coffee cake, warm cinnamon rolls and pecan sticky buns and house-brewed coffee

PM Bake Shop Break 30 minutes 17. | 1 hour 26.
Select Two Types of Cookies: Snickerdoodle, chocolate chip, oatmeal, rocky road and peanut butter; fudge brownies, raspberry bars, individual milks

New Orleans Break 30 minutes 19. | 1 hour 29.
Mini muffulettas, Zapp's Voodoo Chips, mini king cake parfaits and virgin hurricanes

Southern Tea Time 30 minutes 18. | 1 hour 28.
Tea sandwiches: salmon-cucumber and boursin spread, avocado, radish, country ham and fig, blueberries and citrus scones with lemon curd, and seasonal sweet tea

Southern Cupcake Break 30 minutes 18. | 1 hour 28.
Red velvet with cream cheese, spiced maple-bacon and chocolate turtle cupcakes and house-made peach iced tea

Candy Break 30 minutes 16. | 1 hour 26.
M&Ms, Jelly Belly beans, Jolly Ranchers, Swedish Fish, caramels, Laffy Taffy, Pixy Stix, chocolate candy bars and Lemon Sparklers

Citrus Break 30 minutes 18. | 1 hour 28.
Key lime bars, chili-lime cashew and fruit kabobs with citrus yogurt and lemon-infused CQ waters

Sodas, Water a la carte | 6 each

A LA CARTE

Food

Breakfast Bakeries & Muffins | 60. per dozen

Bagel Station | 65. per dozen
Plain, cinnamon raisin and everything

Philadelphia Cream Cheese, sweet butter, wild flower honey and preserves with a toaster

Cinnamon Buns | 65. per dozen

Mascarpone Marble Brownies | 65. per dozen

Cookies | 65. per dozen
Snickerdoodle, chocolate chip, oatmeal, rocky road and peanut butter

Miniature Desserts & Pastries | 65. per dozen

House-Made Granola with Whole, 2% and Skim Milk | 5. per person

Dannon Yogurt | 4.5 each

Greek Yogurt | 5. each

Seasonal Whole Fruit | 3.5 each

Fresh-Cut Fruit | 10. per person

Candy Bars | 6. each

Tortilla Chips & Salsa | 10. each

Assorted Gourmet Chips, Pretzels and Popcorn | 4.50 each

Ice Cream Novelties | 6. each

Deluxe Mixed Nuts | 45. per pound

Cliff Bars and Kind Bars | 6. each

Goo Goo Clusters and Moon Pies | 5. each

Beverages

Freshly Brewed Coffee | 103. per gallon

Assorted Tazo Tea | 103. per gallon

House-Made Peach Sweet Tea | 98. per gallon
Served with fresh lemon wedges

Raspberry Lemonade | 98. per gallon

Soft Drinks | 6. each

Still and Sparkling Bottled Waters | 6. each

Bottled Fruit Juices | 6. each

Vitamin Water | 7. each

Energy Drinks | 7. each

CQ Water Infusions | 98. per gallon
Various refreshing and seasonal flavors

bubly Flavored Water | 5.5 each

LUNCH | BUFFETS *(priced per person)*

All luncheon buffets include unsweet iced tea, freshly brewed coffee and assorted hot tea.

Lunch of the Day | 53. • **Lunch** | 57.

South of the Border | Monday

Caesar Salad with Cotija cheese, croutons and fire-roasted poblano dressing
Cucumber, melon and jicama with agave vinaigrette
Corn, garbanzo beans, cherry tomatoes, green beans with tomato-lime vinaigrette
Chicken adobo
Beef barbacoa
Sweet potato and mushroom
Calabacitas con elote: zucchini, squash, corn, onion and peppers
Flour tortillas, jalapeño salsa, pico de gallo, guacamole, queso fresco and pickled onions
Borracho black beans
Mexican rice
Dulce de leche cheesecake
Mango and coconut mousse
Passion fruit tres leches cake
+ Baja garlic shrimp | 4.

Tennessee Flavors | Tuesday

Iceberg lettuce, grape tomato, cucumbers, Kenny's cheddar with buttermilk ranch
Harvest salad with soy beans, bulgur wheat, kale, pecans, green tomatoes and parsley lemon vinaigrette
Chopped salad with cauliflower, broccoli, cabbage, red onions, mushrooms, blue cheese and barbecue dressing
Chicken breast with apple vinegar white barbecue sauce
Barbecue pulled pork with chow chow
Vegetarian Hoppin' John paella
Cheddar mac and cheese
Southern-style green beans with roasted onions
Jalapeño cornbread
Individual apple cobbler
Jack Daniel's pecan bar
Individual triple layer chocolate trifle
+ Sliced beef brisket | 4.

All prices are subject to a 25% service charge and 9.25% sales tax.

Mediterranean | Wednesday

Baby greens, pickled fennel, goat cheese, strawberry, pecan and apple cider vinaigrette
Spinach, red bibb, mushrooms, red onion, chick peas, lemon-oregano vinaigrette
Cheese tortellini with fire-roasted tomatoes, figs, ricotta and pesto
Antipasto salad with fried artichoke, roasted peppers, cured meats, aged cheese and banana peppers
Chicken with citrus and tomato
Seared salmon with roasted fennel, spinach and capers
Béchamel vegetarian lasagna
Roasted new potatoes with rosemary
Garlic broccolini
Garlic-herb focaccia
Tiramisu
Panna cotta with strawberry-balsamic preserves
White chocolate cherry amaretto bars

The Sandwich Shop | Thursday

Kale vegetable soup
Wild rice salad with dried fruit, walnuts, herbs, sherry vinegar
Niçoise potato salad
BLT salad: baby gem lettuce, tomato, bacon, blue cheese, radish and green goddess dressing
Sliced turkey sandwich on croissant
House smoked pastrami panini on rye with grain mustard aioli and Swiss
Chicken pot pie with pastry
Vegetarian pita with hummus, cucumber, squash, tomato, corn and watercress
Assorted dirty potato chips
Mascarpone brownies
Chocolate caramel terrine
Raspberry cheesecake tarts

An additional charge of \$150 per event will be added to groups with fewer than 50 people.

LUNCH | BUFFETS *(priced per person)*

All luncheon buffets include unsweet iced tea, freshly brewed coffee and assorted hot tea.

Meat and Three Lunch | Friday

Southern Cobb with romaine, corn, black peas, pickled green tomatoes, country ham vinaigrette

Deviled macaroni salad

Broccoli-slaw

Choose three:

- Honey fried chicken
- Chicken and biscuits
- Meat loaf with mushroom gravy
- House smoked sliced brisket
- Fried catfish with Duke's Mayonnaise aioli
- Smoked sausage
- Tennessee mushroom and kale cannelloni

Sides:

- Fried apples
- Sour cream whipped potatoes with gravy
- Roasted tri-colored carrots and cauliflower
- Pull-apart honey rolls

Individual chess pie

Banana pudding

Red velvet cupcakes

Additional protein | 4.

Market Fresh Salad Bar | Saturday

Seasonal bisque

Market fresh salad:

Kale Caesar

Mixed greens with radish, carrot and cucumber

White balsamic vinaigrette, buttermilk ranch and Caesar dressing

Sweet potato with picked parsley, spiked pecans and lime-ginger vinaigrette

Roasted corn with fregola, grilled halloumi cheese, mint and lemon basil vinaigrette

Tomato caprese with fresh mozzarella and berry balsamic reduction

Quinoa, dried apricot, pistachio and orange vinaigrette

Roasted salmon

Grilled chicken breast with lemon and oregano

Shrimp served warm with whole-grain mustard

Artisanal rolls

Cheesecake with berry compote

Fresh raspberry parfait

Flourless chocolate cake

Delicatessen | Sunday

Soup du jour

North Carolina coleslaw

Russet potato salad with bacon and sour cream

Hickory-smoked chicken salad with pecans

Tossed greens with carrot, pear tomatoes, Monterey Jack cheese, cucumber and roasted tomato vinaigrette

Selection of sliced turkey, roast beef*, smoked ham, cheddar cheese, Gouda, provolone and grilled vegetables

Garlic mayonnaise, pickles, giardiniera and whole-grain mustard

Assorted breads and rolls

House-made brownies

Chocolate-walnut blondies

Freshly baked cookies

+ Sliced pastrami | 4.

*Consuming raw or undercooked meats, poultry, seafood, shellfish or eggs may increase your risk of foodborne illness, especially if you have a medical condition. These foods may be cooked to order.

All prices are subject to a 25% service charge and 9.25% sales tax.

An additional charge of \$150 per event will be added to groups with fewer than 50 people.

LUNCH | PLATED *(priced per person)*

All plated luncheons include unsweet iced tea, freshly brewed coffee and assorted hot tea and dessert.

Starter

Choose One:

- Tennessee salad with Romaine, black-eyed peas, roasted corn, tomatoes, pecans and barbecue dressing
- Kale Caesar with grana padano, torn focaccia croutons, poblano and Caesar dressing
- Baby greens, radish, dried cherries, carrots and green goddess dressing
- Spinach, arugula, fire-roasted tomatoes, fennel, goat cheese and caper vinaigrette

Entrée

Choose One Entrée:

Beef Tenderloin* | 53.

Pan-seared beef filet with tomato marmalade, merlot reduction

Braised Beef Short Rib | 50.

Red wine-braised

French Cut Chicken

with Sun-Dried Tomatoes and Feta | 45.

Madeira mushroom sauce

Pan-Seared Chicken | 43.

Mustardo reduction

Salmon | 47.

Olive-tomato jam

Seasonal Catch | 60.

Carrot velouté

Sides

Choose one side:

- Smoked Gouda orecchiette
- Whipped potato with garlic and crème fraîche
- Quinoa pilaf
- Olive oil crushed potatoes
- Cheddar grits

Choose one vegetable:

- Broccolini
- Asparagus
- Heirloom carrots
- Brussels sprouts
- Blistered tomatoes

Dessert

Choose one:

- Lemon-blueberry meringue pie in a Mason jar
- Salted caramel brownie parfait in a Mason jar
- Southern banana pudding with fresh bananas, Nilla Wafers and toasted meringue in a Mason jar
- Chocolate-hazelnut crunch cheesecake bar
- Chocolate pot de crème, cinnamon Chantilly and cinnamon shortbread

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All prices are subject to a 25% service charge and 9.25% sales tax.
(19-08160-F) - 000986

LUNCH | PLATED *(priced per person)*

All plated luncheons include unsweet iced tea, freshly brewed coffee and assorted hot tea and dessert.

Two-Course Executive Luncheon | 42.

Choose One Entrée or Entrée Salad

Entrée

- Chicken salad on croissant with lettuce and tomato, potato salad and pesto pasta salad
- Brisket pot pie, field green salad, carrots, cucumber, cheddar and charred lemon vinaigrette

Entrée Salads

- Five-spice beef flank steak*, charred edamame, carrots, spicy peanuts, frisée, radicchio and lemongrass dressing
- Kale salad with salmon, goat cheese, roasted sweet potatoes, pecans, dried cherries and maple Dijon vinaigrette
- Tennessee cobb salad with bibb lettuce, grilled chicken, black-eyed peas, roasted corn, cheddar cheese, bacon, tomatoes and barbecue dressing

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(19-08160-F) - 000987

GAYLORD OPRYLAND'S SIGNATURE EVENT

Minimum of 150 guests to purchase these buffets (priced per person).

Taste of Opryland | 110.

Stax

All-natural beef sliders with aged cheddar, tomato and roasted garlic aioli

Veggie sliders with sun-dried tapenade

Flash-fried chips

Red velvet cupcakes

Paisano's

Made-in-the-room Caesar salad

Hand-tossed pizzas to include four cheese, pepperoni and vegetable

Tiramisu

Wasabi's at Water's Edge

Choice of vegetarian, California roll, crunchy shrimp and spicy tuna* rolls, wasabi, pickled ginger and soy sauce

Jack Daniel's on the Delta Walkway

Mason jar spinach salad with red onion, candied pecans, boiled eggs and warm bacon vinaigrette

Jack's honey rolls with Tennessee butter and sea salt served in cast iron

Beef brisket and molasses barbecue sauce

Pulled pork with Carolina vinegar sauce

Tennessee hot chicken with bread and butter pickles

Mason jar Jack Daniel's pecan pie and mud pie

CQ peach tea stations

Solario Cantina at Water's Edge *Requires attendant*

Corn tacos with choice beef, chicken or vegetarian

Cojita cheese, queso fresco, guacamole, smoked poblano salsa, assorted hot sauce and cumin crema

Warm Mexican brownie with cinnamon ice cream

Delta Delight Frozen Yogurt

Pick your flavors and toppings for a one of a kind treat

*Only available on the Delta Garden

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(19-08160-F) - 000988

RECEPTIONS | STATIONED HORS D'OEUVRES

Hot Hors d'Oeuvres | 7.5 each

Tennessee Hot Chicken and Waffle Satay

Bourbon barrel maple syrup

Chicken and Cheese Empanada

Brie, Pear and Almond in Phyllo (V)

Smoked Barbecue Pork Spring Roll

Vegetarian Spring Rolls (VV)

Blue ginger sauce

Edamame Pot Sticker (V)

Beef Satay

Chimichurri

Thai Chicken Satay

Peanut sauce

Mini Beef Wellington

Béarnaise

Butter Pecan Shrimp Stick

Andouille Sausage Puff

Beef Short Rib on a Paddle

Wrapped with bacon

Low Country Boil Kabob with Shrimp

Mini Crab Cakes

Spiked aioli and Tennessee chow chow

Chicken Samosa

Cold Hors d'Oeuvres | 7.5 each

Mini Low Country Shrimp Roll

Jack Daniel's

Whiskey-Soaked Fig (V)

Whipped blue cheese, brioche

Jewel Tomato with Mozzarella Mousse (V)

Basil pesto, Melba toast, sea salt

Mini Antipasto Skewers

Soppressata, mozzarella, olive, cherry tomato

Smoked Salmon on Grilled Baguette

Dill, capers, crème fraîche

Duck Rillettes

Blackberry jam, smoked salt, served on crostini

Lump Crab Salad on Cucumber

Micro Chives

Togarashi-Seared Ahi Tuna on a Rice Crisp*

Wasabi, pickled carrot

Mini Charcuterie Board

Pumpernickel, cured beef, Kenny's reserve cheddar, house grain mustard

Mini BLT on Brioche

Opryland honey, Nueske's bacon, tomato, beer-mustard aioli

Nashville Hot Chicken Bites

Fried chicken, biscuit, hot sauce, house pickles, served room temperature

Passed Chef Shots | 8. Each

Cold

Spicy Shrimp

House-made bloody mary mix and cracked black pepper

The California

Hot house cucumber, crab and avocado

Hot

Celery Root & Potato Purée (V)

Wild mushroom ragù and truffle

Shrimp and Cheddar Grits

Bonnie Blue Farm goat cheese and Anson Mills grits

(V) = Vegetarian | (VV) = Vegan

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(19-08160-F) - 000989

RECEPTIONS | DISPLAYS & STATIONS

(priced per person)

Receptions

The Tennessee | 85.

Pimento deviled eggs

Mason jar salads:

- Applewood bacon potato salad with kale coleslaw
- Tomato cucumber salad with aged sherry, fried field peas, baby greens and buttermilk vinaigrette

Gourmet potato chip bar: Cheddar cheese sauce and barbecue sauce served with bacon, blue cheese and green onions

Buttermilk cheddar mac & cheese with assorted hot sauces

Shrimp and grits with Worcestershire sauce

Tennessee hot chicken with bread and butter pickles on Texas toast, carved smoked brisket with molasses barbecue sauce

Goo Goo parfait

Moon Pie terrine

Cherry cobbler

County Fair | 75.

Roasted peanuts

Individual pork rinds in nacho dip

Popcorn (popped in the room)

Fried pickle chips with buttermilk ranch dressing

Tater tot station: Cheddar cheese sauce, house-made chili, diced onions, bacon cracklins and sour cream

Corn dogs with mustard

Beef sliders on house-baked buns with jalapeño ketchup, cheese sauce, Roma tomatoes, shredded lettuce and roasted garlic aioli

Caramel corn, deep-fried Twinkies

Ice Cream Sundae Bar (*Requires attendant*):

- Vanilla, chocolate
- Chef's choice sundae toppings: hot fudge and caramel

RECEPTIONS | DISPLAYS & STATIONS

(priced per person)

Receptions

Smoke House Reception | 115.++

Tennessee salad with Romaine, black-eyed peas, roasted corn, tomatoes, pecans and barbecue dressing

Buttermilk coleslaw

Grilled corn panzanella

Potato salad bar in Mason jars (*Requires attendant*)

Bacon, green onion, black olives, red onion, blue cheese, cheddar cheese, and assorted hot sauce

Signature chili, jalapeño corn bread muffins and honey butter

From the Opryland smoker:

House-smoked beef brisket, pulled pork, beer can chicken, smoked sausage, hot smoked cedar plank salmon

Barbecue Sauces:

Jack Daniel's molasses, Carolina peach and mustard, Alabama white

Sides:

Smoked Gouda mac & cheese, sweet potato streusel, sour cream whipped potatoes, shaved Brussels sprouts, bacon collards, heirloom carrots

Blackberry moonshine buckle

Pecan tarts

S'mores bars

Express Micro Plate* | 25.++

Choose Two:

Sushi roll

California, spicy tuna or fried shrimp

Mini muffuletta and Zapp's Voodoo chips

Pulled pork slider and sweet potato chips

Beef slider, cheddar, roasted garlic aioli, dirty potato chips

Nathan's all-beef mini hot dog, dirty potato chips

Braised mojo pork, Cuban black beans, rice bowl

Sweet potato, kale, mushrooms, feta, toasted almonds, brown rice bowl

Sushi bowl, shrimp, edamame, spicy peanut, whipped avocado, sushi rice

*Only available before a group's departure off property. All Stations have attendant fees, all paper and plastic. All Stations based on one hour of service. Entrées come with choice of soda or water

RECEPTIONS | DISPLAYS & STATIONS

(priced per person)

Make any station an action station. Contact your catering manager for more information.

Stations

Artisanal Cheese Display | 20.

Selection of domestic and imported cheese garnished with seasonal fruit, sliced breads, preserves and gourmet crackers

Fresh Fruit Display | 13.

Honey and walnut dipping sauce

Chef's Selections of House-Rolled Sushi* | 24.

(Based on 4 pieces per person)

California rolls, nigiri and shrimp dynamite rolls with pickled ginger, wasabi and soy sauce

Southern Sushi | 22.

(Based on 4 pieces per person)

Fried chicken sushi, Cajun shrimp and pork sushi, wasabi and soy sauce

Lettuce Wrap Station | 17. *Requires attendant*

Boston Bibb, Thai-spiced chicken and beef and Napa slaw

Antipasti Display | 25.

Parma ham, imported provolone cheese, salami, Mortadella, marinated peppers, mushrooms, grilled artichokes, eggplant, olives and bread sticks

Market Vegetable Crudit  | 13.

Buttermilk green goddess and hummus

Tennessee Hot Chicken and Sweet Corn Bread | 21.

Requires attendant

Buttermilk-brined Tennessee fried hot chicken with bread & butter pickles, hot sauce, sweet corn bread and whipped honey butter

Satay Station | 19.

Indonesian beef, chicken and vegetable satays marinated in ginger, green curry paste, grilled scallions and Asian dipping sauces

Salad and Grain Bar | 27.

Kale Caesar, Chopped House and Cobb Salads
Fregola and Quinoa

Whipped avocado, white bean hummus, lavosh

Parmigiano-Reggiano, blue cheese and aged cheddar

White balsamic vinaigrette, buttermilk ranch and Caesar dressing

Pulled chicken and shrimp

Calzone Station | 20. *Requires attendant*

Choose Two:

- Four cheese
- Mushroom and onion
- Ricotta and ham
- House-ground sausage and pepperoni

Marinara and Asiago b chamel on the side

Sliders and Chips Station | 22.

(Based on 2 per person & requires attendant)

All sliders served with house-made barbecue chips

Choose Two:

- Molasses barbecue pulled pork with pickled slaw
- Angus beef with pimento cheese aioli, Bibb lettuce and tomato
- Peach barbecue with pulled chicken with Tennessee chow chow
- Crab cakes with Old Bay aioli and shredded lettuce
- Vegan burger with lettuce and house-made tomato relish

Served with blue ginger soy, pickled cucumber and Asian slaw

Taco-Taco | 22.

Choose Two:

- Veracruz-style spice-rubbed white fish
- Pulled chicken
- Beef barbacoa
- Pork shoulder carnitas

Served with flour tortillas, pickled red onion, whipped avocados, queso fresco, chipotle ranch, cilantro slaw and pico de gallo

Mac and Cheese Station | 19.

Elbow pasta served with:

- Barbecue pork mac & cheese
- White aged cheddar
- Mushroom and smoked Gouda

Rice Bowls Station | 20. *Requires attendant*

Braised mojo pork, Cuban black beans, rice

Sweet potato, kale, mushrooms, feta, toasted almonds, brown rice

Sushi bowl, shrimp, spicy peanut, guacamole, rice

Assorted hot sauces, tamari, black vinegar

Southern Paella Station | 20.

Long grain rice, andouille sausage, shrimp, chicken, charred peppers and onions

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RECEPTIONS | DISPLAYS & STATIONS

(priced per person)

Carvings

Requires attendant

Pork Roulade with

Chestnuts, Blue Cheese and Spinach | 16.

Smoked cheddar grits and whole-grain mustard reduction

Herb and Pepper-Crusted Tenderloin of Beef* | 23.

Béarnaise aioli and artisan rolls

Slow Smoked Beef Brisket | 17.

Slow-smoked beef brisket, peach mopping sauce and cornbread

Sage-Rubbed Breast of Turkey | 18.

Cranberry relish, pan gravy and parsnip purée

Prime Rib* | 20.

Sour cream horseradish, au jus and artisan rolls

Maple-Brined Fresh Ham | 14.

Pickled mustard seed, house-made chow chow and whole-grain rolls

Bourbon Planked Salmon | 17.

Sweet onion and scallion sauce

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RECEPTIONS | DESSERT *(priced per person)*

Ice Cream Sundae Social | 24.

Requires attendant

Warm chocolate chip cookies baked in the room, chocolate fudge brownies, butterscotch brown butter bars

Vanilla, chocolate and strawberry ice cream

Warm salted caramel sauce and hot fudge

Pineapple and strawberry sauce

Candied pecans, maraschino cherries and fresh cream

French Market Reception | 25.

Crème brûlée

White chocolate-raspberry, coffee and double chocolate

Macarons

Blueberry, chocolate, lemon-poppy seed and raspberry

Crepe station

Berries, Nutella and fresh cream

Southern Sweets | 23.

Mason jar parfaits

Moon Pie, Goo Goo Cluster and Salted Caramel Brownie

Cobblers - *served in cast iron skillets*

Apple, blackberry and peach served with vanilla ice cream

Pecan brittle

Hickory-smoked cocoa nibs and chocolate

DIY Ice Cream Cookie Sandwich Bar | 23.

Warm cookies, snicker doodle, peanut butter, chocolate chip and oatmeal

Dulche de leche, strawberry, chocolate and vanilla ice cream

Candied walnuts, rainbow sprinkles, chocolate chips and crushed Heath bar

S'mores Station | 22.

Toast your own s'mores with house-made marshmallows, chocolate bar, Nutella and graham crackers

S'mores cupcakes

Chocolate cupcake w/ marshmallow filling and chocolate buttercream

Chocolate bark

Dried fruit and nuts

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DINNER | PLATED *(priced per person)*

All plated dinners are served with house-made bread, iced water, freshly brewed coffee and assorted hot tea.

Starter

Choose One:

- Red pepper and eggplant bisque en croute
- Crab and sweet corn bisque en croute
- Mixed baby greens, blue cheese, candied walnuts, dried cherries and red wine vinaigrette
- Pinot Noir poached pear salad with candied pecans, prosciutto, tomatoes and lavender vinaigrette
- Iceberg wedge with crisp bacon, blue cheese, diced carrots, blistered tomatoes, cucumbers and herb buttermilk dressing
- Caprese salad with arugula, honey balsamic, mozzarella cheese, tomatoes and basil pistachio pesto

Entrée

Choose One:

French Cut Chicken Breast | 73.

Parsnip purée, Brussels sprouts, roasted mushrooms, blistered tomatoes and lemon-thyme butter

Oven-Roasted Georgia Chicken | 72.

Peach mustard glaze, pecans, Boursin cheese, Swiss chard and wheat berry wild rice

Honey Bourbon-Glazed Cobia | 80.

Creamed kale, Hoppin' John risotto cake and roasted corn salsa

Chili-Rubbed Pork Chop | 78.

Grilled asparagus, roasted garlic mashed potatoes and charred tomatoes

Braised Short Ribs | 90.

Asiago and sage polenta, roasted carrot hash and lemon garlic broccolini

Filet of Beef* | 100.

Merlot wine glaze, tomato jam, roasted baby carrot and shallot mashed potatoes

New York Strip* | 95.

Red wine reduction, celery root mashed potatoes, onion bacon marmalade and roasted heirloom carrots

Duo Entrée

Chicken & Short Rib Hash | 92.

French cut chicken, shredded short rib, mushroom demi-glace, shallot whipped potatoes and asparagus

Chargrilled Tenderloin of Beef* and Maryland Lump Crab Cake | 112.

Shallot demi-glace, grain mustard butter sauce, fennel potato gratin, blistered tomatoes and asparagus

Chargrilled Tenderloin of Beef* with Grilled Shrimp | 110.

Ragu porcini mushrooms, basil hollandaise, pancetta risotto, charred corn hash and baby carrots

Chargrilled Tenderloin of Beef* with Crab Crusted Cobia | 115.

Merlot wine glaze, creole bierre blanc, wheat berry risotto and braised kale

Dessert

Choose One:

Lemon Meringue Cheesecake and Blueberry Pie

Served with lemon curd gelato

Strawberry-Rhubarb Cobbler and Buttermilk Gelato

Oat streusel crust and brown butter cake

Caramel Cheesecake

Apple-walnut cake and linzer cookie

White Chocolate Pistachio Bar

Cranberry biscotti and pistachio gelato

Dark Chocolate Praline Terrine

Cinnamon pound cake and cherry-amaretto gelato

White Chocolate Clementine Tart

Pumpkin spice cake and mascarpone cream chocolate macaron

Add a custom logo to your dessert | 4.

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(19-08160-F) - 000995

DINNER | BUFFETS *(priced per person)*

All dinner buffets include iced water, freshly brewed coffee and assorted hot tea.

The Southern | 97.

Hoppin' John rice salad with grilled asparagus and feta

Spinach salad with apricots, pecans, bacon, goat cheese and sweet onion vinaigrette

Pickled shrimp, field peas, green tomatoes, kale and aged sherry vinaigrette

Brussels sprout slaw

Pan-seared chicken breast with apple cider sauce

Gulf snapper with sweet corn and scallion butter

Beef tenderloin with smoked peppercorn, double cola barbecue lacquer *Requires attendant*

Warm Yukon gold potato salad

Sweet potato streusel

Roasted corn succotash with pearl onions

Smashed sweet potato

Freshly baked honey rolls

Goo Goo Cluster parfait with caramel, salted peanuts, milk chocolate and marshmallow

Pecan toffee bars with short bread crust

Spiked bread pudding with bourbon-caramel sauce

All-American | 95.

Tomato shrimp cocktail salad with frisée and cucumber

Greens with roasted apple, goat cheese, smoked almonds and white balsamic vinaigrette

Artichoke and olive salad with arugula and sherry-herb vinaigrette

Carved beef sirloin with pinot noir sauce *Requires attendant*

Pan-seared chicken breast with spinach and tomato ragout

Roasted salmon with caper-raisin beurre blanc

Roasted fingerling potatoes

Roasted carrot hash

Freshly baked rolls

New York cheesecake with mixed berry compote

Caramel apple terrine

Boston cream pie

DINNER | BUFFETS *(priced per person)*

All dinner buffets include iced water, freshly brewed coffee and assorted hot tea.

Italian | 96.

Caprese salad with heirloom tomatoes, buffalo mozzarella, fried basil and balsamic reduction

Green salad with Gorgonzola cheese, toasted pine nuts, plumped sun-dried cherries and barrel-aged sherry vinaigrette

Farro salad with tomatoes, mushrooms, citrus and basil

Sundried tomato focaccia

Prosciutto and Parmigiano-Reggiano display

Chicken piccata with lemon butter and capers

Seasonal catch of the day with sage and crushed tomatoes

Braised short ribs with roasted garlic and garnished with green olives

Olive oil crushed potatoes

Roasted cauliflower, zucchini, raisins, pine nuts

Tiramisu

Panna cotta with clementine compote cannoli

Assorted cannoli

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BEVERAGE SERVICE

Host-Sponsored Bars

1-Hour

Resort Brands | 32.

Deluxe Brands | 28.

2-Hour

Resort Brands | 46.

Deluxe Brands | 42.

(After 2 hours, each additional 30 minutes is \$7 per person)

Hand-Crafted Cocktails

13. per drink

Prohibition-inspired with house-made bitters, brown and clear liquors, custom flavored ice and perfectly garnished glassware

Perfect for those receptions that you need to make a little more upscale

Hosted Bars on Consumption

Resort Brand Liquor | 12. per drink

Deluxe Brand Liquor | 11. per drink

Wine | 10. per glass

Domestic Beer | 7.5 per bottle

Craft/Import Beer | 8.5 per bottle

Bottled Soft Drinks | 5.5 each

Bottled Mineral Water | 5.5 each

Bottled Fruit Juices | 5.5 each

Wines

Starving Artist | 10. per glass

Sycamore Lane

Chardonnay and Cabernet

One Hit Wonder | 11. per glass

Greystone Cellars

Chardonnay and Cabernet

Opry Stars | 12. per glass

Storypoint Vineyards

Chardonnay and Cabernet

Liquor

Resort Brands

- Grey Goose
- Bacardi Superior
- Mt. Gay Eclipse Gold
- Bombay Sapphire
- Johnnie Walker Black Label
- Knob Creek
- Jack Daniel's
- Crown Royal
- Patron Silver Tequila
- Hennessy Privilege VSOP

Deluxe Brands

- Absolut
- Bacardi Superior
- Captain Morgan Original Spiced
- Tanqueray
- Johnnie Walker Red Label
- Maker's Mark
- Jack Daniel's
- Canadian Club
- 1800 Silver
- Courvoisier VS

Beer

Craft/Import

- Heineken
- Corona
- Samuel Adams

Domestic

- Budweiser
- Bud Light
- Miller Lite
- Omission (gluten-free)

Non-Alcoholic

- Becks
- O'Douls

Make your bar local with these great Nashville products:

Yazoo Beers | 8.5 each

Corsair Liquors | 11. & up per drink

77 Ale | 8.5 each

Celebrate Gaylord Opryland's 40th anniversary with an exclusive American Pale Ale (APA) from Blackstone Brewing Company, Nashville's oldest and most award-winning brewery.

Our expertise lies in specialty cocktails. Please ask your catering manager for details.

WINE MENU

BUBBLES

Freixenet, Blanc de Blancs, Cava Brut , <i>Catalonia</i>	
Segura Viudas "Aria," Cava Brut , <i>Catalonia</i>	
La Marca, Prosecco , <i>Italy</i>	
Moët & Chandon, Brut , "Impérial," <i>Champagne</i>	
Mumm Napa, Brut , "Prestige," <i>Napa Valley</i>	
Veuve Cliquot "Yellow Label," Brut , <i>Reims</i>	
Gruet, Brut Rose , <i>New Mexico</i>	
Moët & Chandon "Dom Perignon," Vintage Brut , <i>Epernay</i>	

SWEET WHITES / BLUSH

St. Supery Vineyards, Moscato , <i>Napa Valley</i>	
Chateau Ste. Michelle, Riesling , <i>Columbia Valley</i>	
Arrington Vineyards, White Blend , <i>Tennessee</i>	
Conundrum, White Blend , <i>California</i>	
Beringer, White Zinfandel , <i>California</i>	

LIGHT WHITES

Pighin, Pinot Grigio , <i>Friuli-Venezia</i>	
Salmon Creek, Pinot Grigio , <i>California</i>	
Terlato Family Vineyards, Pinot Grigio , <i>Friuli</i>	
Brancott Estate, Sauvignon Blanc , <i>Marlborough</i>	
Kim Crawford, Sauvignon Blanc , <i>Marlborough</i>	
Chateau de Sancerre, Sancerre , <i>Loire</i>	
Cakebread Cellars, Sauvignon Blanc , <i>Napa Valley</i>	
Cloudy Bay, Sauvignon Blanc , <i>Marlborough</i>	

CHARDONNAY

Arrington Vineyards, Chardonnay , <i>Tennessee</i>	
Cakebread Cellars, Chardonnay , <i>Napa Valley</i>	
Chateau Ste. Michelle, "Canoe Ridge Est.," Chardonnay , <i>Horse Heaven Hills</i>	
Clos du Bois, Chardonnay , <i>North Coast</i>	
Greystone Cellars, Chardonnay , <i>California</i>	
J.W. Morris, Chardonnay , <i>California</i>	
Louis Jadot, "Pouilly Fuisse," Chardonnay , <i>Burgundy</i>	
Shafer, "Red Shoulder Ranch," Chardonnay , <i>Carneros</i>	
Storypoint Vineyards, Chardonnay , <i>California</i>	
Trefethen, Chardonnay , <i>Napa Valley</i>	

LIGHT-BODIED REDS

36	Acacia, Pinot Noir , <i>Carneros</i>	56
40	MacMurray Ranch, Pinot Noir , <i>Central Coast</i>	60
48	Mark West, Pinot Noir , <i>California</i>	48
125	Merry Edwards, Pinot Noir , <i>Sonoma Coast</i>	128
68	Solena, "Grand Cuvee," Pinot Noir , <i>Willamette Valley</i>	75
135	Alamos, Malbec , <i>Mendoza</i>	40
72	Decoy by Duckhorn, Merlot , <i>Sonoma County</i>	60
295	J.W. Morris, Merlot , <i>California</i>	40
	Rutherford Hill, Merlot , <i>Napa Valley</i>	56
	Stags' Leap Winery, Merlot , <i>Napa Valley</i>	110

FULL-BODIED REDS

52	Avalon, Cabernet Sauvignon , <i>Napa Valley</i>	56
56	Caymus, Cabernet Sauvignon , <i>Napa Valley</i>	225
40	Ferrari-Carano, Cabernet Sauvignon , <i>Alexander Valley</i>	86
	Greystone Cellars, Cabernet Sauvignon , <i>California</i>	48
	Jordan, Cabernet Sauvignon , <i>Sonoma County</i>	140
50	Louis Martini, Cabernet Sauvignon , <i>Napa Valley</i>	60
40	Lyeth, "L de Lyeth," Cabernet Sauvignon , <i>Sonoma County</i>	52
58	Silver Oak, Cabernet Sauvignon , <i>Alexander Valley</i>	165
48	Stag's Leap Wine Cellars, "Artemis," Cabernet Sauvignon , <i>Napa Valley</i>	150
56	Sterling, Cabernet Sauvignon , <i>Napa Valley</i>	65
68	Storypoint Vineyards, Cabernet Sauvignon , <i>California</i>	54
75	Hayman & Hill, Meritage , <i>Napa Valley</i>	56
80	Ruffino, Riserva Ducale, Chianti Classico , <i>Tuscany</i>	68
	Arrington Vineyards, "Red Fox," Sangiovese Blend , <i>Tennessee</i>	48
	D'arenburg, "Laughing Magpie," Shiraz , <i>McClaren Vale</i>	72
48	Conde de Valdemar, Tempranillo , <i>Rioja</i>	44
98	Numanthia, "Termes," Tempranillo , <i>Toro</i>	92
	St. Francis, "Old Vines," Zinfandel , <i>Sonoma County</i>	66
62	The Prisoner, Zinfandel Blend , <i>Napa Valley</i>	90

All prices are subject to a 25% service charge and 9.25% sales tax.

Additional Tennessee tax of 15% on liquor and wine

(19-08160-F) - 000999

GUIDELINES | OPERATIONAL POLICIES

Attendance Estimates & Guarantees

1. A 10-day updated estimate attendance count is required on all meal functions. Your catering manager must be notified of the updated estimate of attendance by 8 a.m. Central Standard Time on the specified days. In the event an updated estimate of attendance is not received by 8 a.m. Central Standard Time, the original or most recent estimated attendance count will be utilized. The 10-day estimated attendance numbers can be increased or decreased by a maximum of 10% when submitting the 72-hour final guarantee. Increases above 10% will be accommodated based upon product availability from suppliers and cannot be guaranteed. Your catering manager will provide you with a schedule of dates the updated estimates are due.
2. A 72-hour (3 working days) guarantee is required on all meal functions. Prior to each event, your catering manager must be notified of the exact number of attendees from whom you wish to guarantee payment by 8 a.m. Central Standard Time on the specified days. In the event a guarantee is not received by 8 a.m. Central Standard Time, the most recent estimated attendance count will be prepared and billed. For functions scheduled on Tuesday, the guarantee must be received by 8 a.m. Central Standard Time on the preceding Friday. The Hotel will only plate food for the guaranteed number of meals and prepare to serve the set number as follows: 5% over the final guarantee for events 499 guests and below and 3% over the final guarantee for events with 500 guests and above.


Additional Fees, Taxes, Pricing & Payment

1. All food and beverage functions are subject to a 25% service charge and 9.25% sales tax. Wine and liquor are subject to an additional 15% tax.
2. All bars are subject to a \$200.00 bartender charge.
3. Attendants for stations including Carvers are \$200.00 charge per station.
4. Pop-Up Fees – The hotel reserves the right to add an \$85 fee to all “pop-up” requests. A “pop-up” is classified as an event that is requested for the hotel within 72 business hours of the group arrival.
5. Seating arrangements are 72” round tables set up for 10 persons per table. Requests for seating arrangements with fewer than 10 persons per table will incur additional labor fees.
6. When entertainment is contracted, the client will be responsible for any costs incurred for additional audio/visual, electrical hook-ups, Food & Beverage and Security. Client should be aware and inform the hotel of setup times for contracted entertainment.
7. Any meal functions requiring complete table setup by more than one half-hour prior to serving time or a delay of one half-hour over the planned starting time is subject to a labor charge.
8. Prices – Prices herein are subject to increase in the event costs of food, beverages or other costs of operations increase at the time of the function. Patron grants the right to the hotel to increase such prices or to make reasonable substitutions on the menu with prior written notice to the patron, providing, however, patron shall have the right to terminate this agreement within 7 days after such written notice from Gaylord Opryland Resort and Convention Center Nashville.
9. Payment must be made in advance of the function unless credit has been established to the satisfaction of the hotel, in which an event deposit shall be paid at the time of signing. The balance of the account is due and payable 30 days after the date of the function. A deposit of 25 percent of the total balance of social functions is required.
10. All event orders must be signed prior to the first event.

General Information & Policies

1. The hotel does not allow any food or beverages to be brought in from the outside by guests, due to city, state, health and liquor laws. The hotel will purchase any special items requested from a licensed purveyor.
2. Carved menu items can be served a maximum of 2 hours per state health codes. After a 2-hour period has elapsed, the carved item must be removed and/or replaced if additional quantities were ordered and still available.
3. Outdoor Functions – The hotel reserves the right to make the decision to move any outdoor function to the inside backup space due to inclement weather. You will be advised of all options for your function at a minimum of 8 hours in advance of the event. The hotel's decision is final.
4. Gaylord Opryland Resort and Convention Center, as a licensee, is responsible for the administration of the sale and service of alcoholic beverages in accordance with the Tennessee Alcoholic Beverage Control Board's regulations. It is our policy, therefore, that all liquor must be supplied by the hotel and sold by the drink. The hotel will purchase specific items requested from licensed vendors.
5. The hotel, according to the guaranteed minimum number of people anticipated, assigns function rooms. Room rental fees are applicable, and additional set-up fees could be applied for room sets changed on the day of the event. The hotel reserves the right to change groups to a room more suitable at the hotel's discretion, if attendance decreases or increases.

VA/DoD Suicide Prevention Conference
August 27-29

Registration Clings	Freeman We're looking at between \$2,220.15 and \$2,808.15.
Rental Space for two pole banners	\$150.00 Per pole-total of \$300.00
Draping for Exhibitor space	Total (taxes not included) \$3,506.00  TENNESSEE BALLROOM 8x10 Lot Two week lead time
Additional cost for GS room Set up	Difference of \$3938.10
Rigging for all conference signs	Rigging of four conference banners; \$4000.00 total
Breakfast/Coffee/Tea-grab and go tables	Gaylord Banquets-see attached pricing guide
Receptions:	Tuesday evening prior to the conference or Wednesday evening during Poster presentations

From: Scher, Deborah L.
Sent: 31 Jul 2019 13:39:32 +0000
To: (b)(6) [SCGUS]
Subject: RE: [EXTERNAL] Fwd: VA/DoD Suicide Prevention Conference

Yes. I tried to reach her yesterday but was not successful. You might also try to reach her directly as this is my last day in the office for the next 10 days and we may not connect.

From: (b)(6) [SCGUS] (b)(6)@its.jnj.com>
Sent: Wednesday, July 31, 2019 8:31 AM
To: Scher, Deborah L. <Deborah.Scher@va.gov>
Subject: [EXTERNAL] Fwd: VA/DoD Suicide Prevention Conference

Deborah

Can you connect with Wendy regarding our discussion yesterday when you get a chance?

Sent from my iPhone

(b)(6)
Johnson & Johnson Healthcare Systems
Field Director Federal Team/ Strategic Engagement
(b)(6)
(b)(6)@its.jnj.com

Begin forwarded message:

From: "Lakso, Wendy" <Wendy.Lakso@va.gov>
Date: July 31, 2019 at 7:40:20 AM EDT
To: (b)(6)@its.jnj.com" (b)(6)@its.jnj.com>
Subject: [EXTERNAL] VA/DoD Suicide Prevention Conference

Good morning (b)(6)

I am circling back to see the interest of Johnson and Johnson's support to the VA/DoD Suicide Prevention Conference. We are finalizing plans. Below are a list items/events we are hoping for partnership support (the banquet menu is attached):

1. **Reception Wednesday August 28th** evening during poster presentation: Menu attached - the carving stations are between \$16-\$23 per person (page 18 for reference) and could be accompanied by some hors d'oeuvre stations that range anywhere from \$7.50 per piece to \$27 per person (see pages 14 & 17 for these).
2. **Registration Wall Cling Graphics:** Freeman Wall Cling graphics and labor to install and remove: \$2,220.15 and \$2,808.15.
3. **Rental Space for two pole banners**
\$150.00 Per pole-total of
\$300.00
4. **Draping for Exhibitor space**
Total (taxes not included) \$3,506.00

5. Additional cost for GS room Set up

Difference of

\$3938.10

6. Rigging for all conference signs - four conference banners

~~\$4000.00~~ total

7. Breakfast/Coffee/Tea-grab and go tables

Gaylord Banquets-see attached pricing guide

Thank you very much for your willingness to help with the VA and DoD Suicide Prevention Conference.

Wendy

Wendy Lakso

Deputy Executive Director, PREVENTS Executive Order 13861

Department of Veterans Affairs

Cell: (202) 794-3478

From: Eversole, Eric
Sent: 31 Jul 2019 19:41:16 +0000
To: (b)(6)@its.jnj.com
Cc: (b)(6)
Subject: [EXTERNAL] Best practices in the workforce around mental wellbeing and suicide prevention

(b)(6)

The U.S. Chamber of Commerce Foundation-Hiring Our Heroes is working with the U.S. Department of Veterans Affairs (VA) to help identify and share best practices in the workforce around mental wellbeing and suicide prevention for the benefit of Veteran employees and all Americans. Because of the recognized commitment your leadership in this field has demonstrated, we are asking for your expertise in helping to build a consensus roadmap of the most effective programs and then to galvanize your fellow corporate leaders to pledge to implement them.

As a first step, we will be holding a meeting in Washington on August 21 with a select group of your peers representing a diversity of industries to share insights, best practices, key metrics and outcomes measurements. We hope you will join us.

On average, 20 Veterans die by suicide each day. VA research has determined that 6 of the 20 Veterans receive health care services from the VA system, and 14 do not. The VA has requested our partnership to help provide programs of broad and effective mental health support to those they do not reach. We know this is of critical importance to you and would value your expertise.

We encourage participating leaders to use this meeting as a platform to educate, listen and learn from each other and to produce a Best Practices Program Roadmap that CEOs will be asked to publicly pledge to implement. Our agenda will also include vital next steps and identify potential obstacles in rolling this out to our broader membership.

The meeting will be held from 10:00 a.m. - 2:00 p.m. at the U.S. Chamber of Commerce, 1615 H Street NW, Washington D.C. 20062. Please respond to (b)(6) at (b)(6)@uschamber.com by August 9, 2019.

We look forward to seeing you there as we launch this mission critical work.

Best regards,

Eric

Eric Eversole

President, Hiring Our Heroes

Vice President, U.S. Chamber of Commerce

✉ 1615 H Street NW | Washington, DC | 20062

☎ (b)(6) office (b)(6) mobile

📧 (b)(6)@uschamber.com

From: Scher, Deborah L.
Sent: 31 Jul 2019 22:48:20 +0000
To: Manji, Hussein [JRDUS]
Subject: FW: [EXTERNAL] Request for Information (RFI): PREVENTS

Dear Hussein:

Thank you again for making time to speak on the phone last week. I appreciated your time and the information you shared.

I wanted to make sure you saw this request for information that the VA has posted around mental health and suicide prevention. They have extended the due date to August 12. I am guessing someone within your organization is already working on this but just wanted to doublecheck.

Sending warmest regards,

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
U.S. Department of Veterans Affairs
www.va.gov/scsp

<https://www.research.va.gov/PREVENTS/>

From: Scher, Deborah L.
Sent: 3 Jul 2019 23:51:25 +0000
To: (b)(6) Manji, Hussein [JRDUS]
Cc: (b)(6)
Subject: Introducing your new VA panel member!
Attachments: (b)(6) photo and bio for PASA.docx

Dear Dr. Manji and (b)(6):

By copy of this email, I am pleased to introduce you to Dr. (b)(6), a VA rockstar leader in mental health research. In addition to the accomplishments outlined in her bio attached, Dr. (b)(6) is currently leading an incredibly innovative “pay for performance” program securing meaningful employment for veterans with PTSD.

We are grateful for the invitation you extended to have the VA participate at the upcoming One Mind summit and believe Dr. (b)(6) would make a terrific addition to Dr. Manji’s panel. I will leave it to the three of you to make follow up arrangements.

Best wishes to you all for a Happy Fourth of July. I am very much looking forward to meeting you in person and learning from you at the summit in September.

Warm regards,

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary’s Center for Strategic Partnerships
U.S. Department of Veterans Affairs
www.va.gov/scsp

(b)(6)



(b)(6) MD, is Associate Chief of Staff for Research at the Tuscaloosa VA Medical Center and Professor of Psychiatry in the Department of Psychiatry, University of Alabama Health System, in Birmingham and Tuscaloosa, AL. She received her undergraduate degree from Duke University and her medical degree from the University of North Carolina at Chapel Hill. She completed psychiatry residency at the University of Alabama at Birmingham. Dr. (b)(6) has been conducting clinical trials in the treatment of posttraumatic stress disorder, major depression, and addictions for over 25 years. She was a member of the American Psychiatric Association Mood Disorders Workgroup on DSM-5 and is a member of the 2017 VA-DoD workgroup for the revision of the Clinical Practice Guidelines for PTSD. She is Study Chair for the VA Cooperative Study Program multisite trial evaluating the efficacy of Individual Placement and Support supported employment in the rehabilitation of unemployed Veterans with PTSD. Her most recent project funded by the PASA Consortium is focused on kappa-opioid receptor antagonism in the treatment of veterans and service members recovering from alcohol use disorders (AUD) and comorbid posttraumatic stress disorder (PTSD). The multi-site study evaluates the efficacy and physiological effects of sublingual buprenorphine (Subutex) combined with extended-release injectable naltrexone (Vivitrol) in the treatment of comorbid AUD and PTSD. Sublingual buprenorphine, which acts as an antagonist at kappa and partial agonist of the mu receptors, combined with extended-release injectable naltrexone, which blocks the mu receptor, yields a pharmacologically net effect of kappa opioid receptor (KOR) antagonism.

From: Scher, Deborah L.
Sent: 22 Jul 2019 19:03:25 +0000
To: Manji, Hussein [JRDUS]
Subject: Your guidance

Dear Hussein:

I hope this finds you well. I have already registered for One Mind in September and am looking forward to meeting you in person then.

(b)(6) has officially started at the VA and the Suicide prevention task force is underway. If you can spare a few minutes, I would be grateful to hear your guidance on a few of our initiatives.

Thank you in advance for your consideration.

Best regards,

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
U.S. Department of Veterans Affairs
www.va.gov/scsp

From: (b)(6) [SCGUS]
Sent: 29 Apr 2019 18:50:38 +0000
To: Scher, Deborah L.
Cc: Manji, Hussein [JRDUS]
Subject: [EXTERNAL] Introduction to Dr. Manji
Attachments: Suicide Prevention Czar Position Description Final 4.23.19.pdf

Deborah,

I was able to connect with Dr. Manji today and wanted give him a brief synopsis of the role for which you are looking to fill. I have copied him above and have shared the job description as well.

I will let you both take it from here to talk live.

Thank you for trusting us enough to share this new role and seek candidates inside the J&J family.

(b)(6)
Field Director Federal Team/ Strategic Engagement
Strategic Customer Group

Johnson & Johnson HEALTH CARE SYSTEMS INC.

Mobile: (b)(6)
Fax: 866.485.2348
E-Mail: (b)(6)@its.jnj.com

Providing services for Janssen Pharmaceutical Companies of Johnson & Johnson

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From: Scher, Deborah L. <Deborah.Scher@va.gov>
Sent: Friday, April 26, 2019 10:48 AM
To: (b)(6) [SCGUS] (b)(6)@its.jnj.com>
Subject: [EXTERNAL] Call Follow-up

Dear (b)(6)

As we discussed. Thank you in advance for helping us identify the best candidates for this critical position. I look forward to our follow-up conversation.

Enjoy your time with your son this weekend!

Warm regards,

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships

US Department of Veterans Affairs
[Follow us on Twitter](#)

President's Roadmap to Empower Veterans and End a National Tragedy of Suicide (PREVENTS) Executive Order Program Office / Department of Veterans Affairs

Suicide Prevention Czar:

On March 5, 2019, President Trump issued a national call to action and signed a landmark Executive Order designed to take an inclusive and innovative approach to impacting the scourge of Veteran suicide. Veterans are 1.5 times more likely than non-Veterans to take their lives and 20 die by suicide on average each day according to the Department of Veterans Affairs. The President's order, the PREVENTS initiative, creates a Cabinet-level task force to be led by VA Secretary Robert Wilkie that will coordinate and align efforts across the federal government and throughout industry to help stem the Veteran suicide crisis. In the process, we anticipate this task force will raise the national conversation about mental health and develop new, innovative solutions to help all Americans reverse this human tragedy.

The Suicide Prevention Czar will provide a unique opportunity to lead this initiative across government, industry, foundation and other resources, serving as a national figure to galvanize all of America to take action to reverse this crisis. The position will bring together the most impactful researchers focused on suicide prevention to accelerate insights and the development of new initiatives. The Suicide Czar will serve as a focal point to unite disparate efforts and inspire action from experts and innovators across multiple organizations through public and internal working sessions, meetings and convening. This effort will complement the strategy of the VA's National Office of Suicide Prevention by working closely to set priorities and develop the implementation roadmap to articulate an effective path forward.

The Suicide Prevention Czar is a senior leadership position with a broad mandate to incorporate innovative and novel solutions to a nationwide crisis that is destroying lives and families. Reporting directly to VA Secretary Robert Wilkie, the Suicide Prevention Czar will be the national voice to effectively lead this mission critical effort and deliver impactful results. This position is anticipated to be for a minimum of one year.

Responsibilities for this position include:

- Serving as an advocate for the PREVENTS Initiative
- Driving inspired and creative engagement with governmental, not-for-profit, and private sector partners aligned with the EO's objectives
- Serving as the lead in external and internal facing events by communicating key messaging and objectives
- Coordinating with VA's leadership on healthcare delivery and strategies, Veterans Experience, Strategic Partnerships, VSO engagement, Public Affairs and other relevant offices and responsibilities
- Serving as the Executive responsible for EO execution and working with VA's Office of the Secretary to ensure efforts reflect the Secretary's priorities and coordination with other VA leaders

Reporting relationships:

- Incumbent will report to the task force leadership, the head of the Domestic Policy Council and the Secretary of the Department of Veterans Affairs

- Incumbent will serve as the primary contact for the cross-governmental steering committee
- Internally, the Executive Director will coordinate with other VA offices primarily with the National Office of Suicide Prevention as well as the Veterans Experience Office, the Secretary's Center for Strategic Partnerships and the Office of Public and Intergovernmental Affairs
- Incumbent will direct internally provided staff and budget

Experience and Capabilities:

It is expected that the Suicide Prevention Czar's career will have shown a passionate commitment to this issue as well as significant experience directing portfolios and research programs to drive innovation in this field. Specific experience related to service member and Veterans mental health, community engagement and overall wellness is prioritized, along with experience within defense or civilian government. Demonstrated evidence of coalition building across multiple organizations and collaboration is critical.

From: (b)(6)
Sent: 29 Apr 2019 22:58:28 +0000
To: (b)(6) Barry, Ashleigh
Cc: Scher, Deborah L.
Subject: FW: [EXTERNAL] RE: VA Healthcare Final Details
Attachments: VAHealthcare2019MAIN15.pdf, FINAL - Venue Map.pdf

FYSA.

Sent with BlackBerry Work
(www.blackberry.com)

From: (b)(6) <(b)(6)@iqpc.com>
Date: Monday, Apr 29, 2019, 5:27 PM
To: Scher, Deborah L. <Deborah.Scher@va.gov>
Cc: (b)(6) <(b)(6)@va.gov>
Subject: [EXTERNAL] RE: VA Healthcare Final Details

My sincere apologies; but I neglected to include the brochure and venue map as an attachment to my last email.
Please find the attached and let me know if you have any questions or need anything at all prior to the conference.

Thank you,
(b)(6)

(b)(6)
Senior Event Coordinator – IQPC New York
1410 N. Westshore Blvd., Suite 510, Tampa, FL 33607
535 5th Avenue, 8th floor, New York, New York 10017
T: (b)(6) E: (b)(6)@iqpc.com



From: (b)(6)
Sent: Monday, April 29, 2019 5:25 PM
To: 'Deborah.Scher@va.gov'
Cc: (b)(6)
Subject: VA Healthcare Final Details

Good Evening Deborah,

We are only two weeks away from the VA Healthcare 2019 summit in National Harbor, Maryland and the conference will be here before you know it!

This email is to advise on any outstanding items, review your conference registration, and outline important onsite details.

Below you will find:

- I. Registration Information
- II. Session Information
- III. **Outstanding Items**
- IV. Onsite Logistics
- V. Conference Venue and AV Information

Please read this email **CAREFULLY** and reply back to confirm receipt and understanding of all items; so that I know you have received all important details.

I. Your Registration Information

- **You are currently registered for:**
 - Main Summit Day One and Two (Monday, May 13 – Tuesday, May 14, 2019)
 - Post-Conference Focus Day (Wednesday, May 15, 2019)
- **Dietary requirements or other personal needs:** None

II. Your Session Information

- General Session on Main Summit Day One on Monday, May 13, 2019 at 9:00am
 - **AV needs indicated for this session:** None

III. Outstanding Items

- **Speaker Information Form:** Received
- **Biography:** Received
- **Presentation for this session: Past Due – Please submit to Alecia Savas as soon as possible**

IV. Onsite Logistics

1. Zia Durrani will be your onsite contact. Zia's contact information for on-site purposes only will be provided in an email to you next week. Please keep an eye out for this email as it will include a few final reminders before the summit.
2. Please **bring a back up copy** of your PPT/presentation file and any videos on a thumb drive. This is important to have, regardless if you submitted your presentation ahead of time.

- If you have not already done so, please be sure to email your presentation to me by Friday, May 3, to ensure your presentation is uploaded prior to your speaking session.
3. **Please be present in the conference area at least 60-75 minutes** before your session begins; be sure to identify yourself as a speaker at the event registration desk.

V. Conference Venue and AV

**Gaylord National Resort and Convention Center, 201 Waterfront Street
National Harbor, MD 20745**

1. Please refer to the attached map, labeled Venue Layout, for the session room locations. There will be plenty of directional signage throughout the event space. Please note room locations are subject to change; but you will be notified immediately if this were to occur.
2. For track and general sessions, an event chairperson will introduce you with highlights from your biography at the beginning of your talk, and show time cards near the end. Please be mindful of the time cards, as it is imperative for us to stay on schedule for the duration of the conference.
3. For track and general sessions, A/V set up will consist of a stage, a PC, (pre-loaded with your presentation, if it was provided beforehand), wireless microphones and a Q&A microphone. A Confidence Monitor will be given for the General Session.
4. The speaking time in the schedule (*attached*) includes any time you'd like to leave for **Q&A** – there will be a roving microphone in the audience.

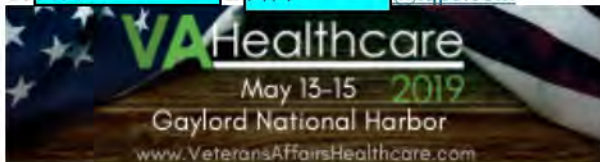
Please let me know if you have any questions or require any assistance as you prepare for the conference.

Sincerely,

(b)(6)

(b)(6)

Senior Event Coordinator – IQPC New York
1410 N. Westshore Blvd., Suite 510, Tampa, FL 33607
535 5th Avenue, 8th floor, New York, New York 10017
T: (b)(6) E: (b)(6)@iqpc.com



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VA Healthcare 2019

PUTTING VETERANS FIRST! DEVELOPING NEXT-GEN CARE.

MAY 13 – 15, 2019 • Gaylord National Resort & Convention Center
www.VeteransAffairsHealthcare.iqpc.com

NO COST TO ATTEND FOR ALL ACTIVE U.S. GOVERNMENT AND MILITARY PERSONNEL!

Although the subject matter of this IDGA conference relates to VA healthcare, this is a non-VA event. IDGA is solely responsible for its content and neither the Department of Veterans Affairs nor any of its components (VHA, VBA) have sponsored or endorsed this event or IDGA.

VA Healthcare 2019

Dear VA Healthcare Professional,

"To care for him who shall have borne the battle, and for his widow, and his orphan"
President Lincoln

The Department of Veterans Affairs has continued to improve and deliver more sophisticated and effective care to our nations veterans. Recent steps have been taken to eliminate the backlog of patients requiring care, raising the level of patient satisfaction and partnering with VSO's to support communities.

Introducing change management and new technology is no easy task and the VA has made some great progress in working to overcome those challenges, but there is still a lot of change to come.

VA Healthcare 2019 will bring together **300+ individuals** ranging from **VA officials, industry executives, elected officials, and academia** from across the U.S. and stakeholders to discuss the challenges at the forefront of veteran healthcare operations, policy and procurements. Key themes running throughout the summit will be the VA's top priorities as we provide accessibility to veterans, modernize infrastructure, enhance resources and strengthen mental health services being provided.

During the week you will have the opportunity to learn, share and connect with thought leaders to **discuss the VA's priorities, the latest budget spending and where investments are being made to enhance the transformation of healthcare services being administered to veterans.**

We look forward to welcoming you to the community's conference to support veterans healthcare.

See you there!

Respectfully,



Zia Durrani
Senior Program Director
VA Healthcare 2019

Note: Although the subject matter of this IDGA conference relates to VA healthcare, this is a non-VA event. IDGA is solely responsible for its content and neither the Department of Veterans Affairs nor any of its components (VHA, VBA) have sponsored or endorsed this event or IDGA.



CONTINUING EDUCATION CREDITS

Accreditation	AACME	ANCC	APA	ASWB	ACHE
Years	2	2	2	2	3
Credit	60	30	40	40	36
Credit Required Hours	30 minutes or more	30 minutes or more	30 minutes or more	1 hour or more sessions	1 hour or more sessions
Here's how many credits you can earn by attending	15	15	15	14	14

(19-08160-F) 004019

2019 SPEAKERS SUPPORTING VETERANS

VAHealthcare
2019



Margarita Devlin
Principal Deputy Under
Secretary for Benefits
U.S. Department of Veterans
Affairs



Deborah Lafer Scher
Executive Advisor to the
VA Secretary, Secretary's
Center for Strategic
Partnerships
Department of Veterans
Affairs



Surafeal Asgedom
Chief Modernization Officer
U.S. Department of
Veterans Affairs



Peter Shelby
Former Assistant
Secretary for Office of
Human Resources &
Administration
Summit Chair & Key
Advisor



Dr. Lynda Davis
Chief Veterans
Experience Officer
U.S. Department of
Veterans Affairs



Joseph Ronzio
Deputy Chief Health
Technology Officer
Department of Veterans
Affairs



Lourdes (Alfie) E. Alvarado-
Ramos
President
National Association of State
Directors of Veterans Affairs



Vito Imbasciani PhD MD
Secretary
California Department of
Veterans Affairs



Col (R) Wanda Wright
Director of Veteran
Services
Arizona State
Government



Kelley Kash
President
National Association of
State Veterans Homes



Frank Coluccio
Program Manager,
Technology Acquisition
Center
Department of Veterans
Affairs



Jeffrey Saura
Chief Technology
Officer
Orlando VA Medical
Center (OVAMC)



Richard Griffith
Chief Strategy Officer
Veteran Health Indiana
U.S. Department of
Veteran Affairs



William Cerniuk
Program Director, VA Mobile
Health VHA Technology
Director
U.S. Department of Veterans
Affairs



Steve Richter
SVP & General Manager
Insight Imaging Mobile
Solutions



Chakakhon Lea
Office of Information
and Technology
U.S. Department of
Veterans Affairs



COL(R) Dennis O. May
Deputy Director,
Center for Minority Veterans
U.S. Department of Veterans
Affairs



Dr. Huanguang Jia
Research Health Scientist
VA Center of Innovation
on Disability and
Rehabilitation Research



Dr. Cowper Ripley
Acting Co-Director
VA Center of Innovation on
Disability & Rehab Research



Dr. Moraima Trujillo
Psychiatrist
Miami Veterans Affairs
Healthcare System



Dr. Ismene Petrakis
Chief of Psychiatry and Mental
Health Service Line
VA CT Healthcare System

(19-08160-F) - 001019

2019 SPEAKERS SUPPORTING VETERANS

VAHealthcare
2019



Dr. Kimberlee Bayless, DNP
Nurse Practitioner & Director
of the Transitional Pain
Service
George E. Wahlen
Department of Veterans
Affairs Medical Center



Jan Lindsay, Ph.D.
Director, Telebehavioral
Health
Michael E. DeBakey VA
Medical Center



Benjamin Brooke, MD,
PHD, FACS
Chief, Division of
Vascular Surgery
University of Utah



Michael J. Buys, MD
Anesthesiologist & Assistant
Clinical Professor
University of Utah



Amy Beckstead, RN, MSN
Nurse Educator & Manager
VA Regional Centers of
Innovation Specialty Care



Cherissa Jackson
Chief Medical Executive
AMVETS



Terrence Moultrie
Deputy Chief of Verification
Support at CVE
Department of Veterans
Affairs



Alan Macht
Director of Sales and Marketing
Action Manufacturing Inc.



William D. Frazier, MD
CMO
Viemed



Dr. Robert Martindale, MD
Professor of Surgery, Chief of
Gastrointestinal and General
Surgery & Medical Director
Hospital Nutritional Service
Oregon Health Sciences
University



Barbara Haight, Pharm.D
Medical Affairs
Indivior



Dr. Don Kosiak
Senior Vice President & Chief
Medical Officer
Leidos



Dr. Joshua Yamamoto
Cardiologist
Georgetown University
Hospital



Tina Joros, JD
VP and General
Manager Open Business Unit
and Financial Platforms
Allscripts



Valerie Li
Government and IDN
Director
Rauland



LTG (R) Mark Hertling
Author, Speaker &
Contributor to
Physician
Leadership
Development



Jody Searight
Chief Care In The
Community
Department of
Veterans Affairs



Monica Diaz
Executive Director
VHA Homeless
Programs Office



Dr. Anne Andorn MD
CMO
Indivior



Dr. Aldo Morales
Psychiatrist & Medical
Director
Retreat Behavioral
Health



Jonathan Langer
CEO
Medigate



Jerry Zhou
Founder, Chief Innovation
Officer and Artificial
Intelligence and Machine
Learning Evangelist
Futrend Technology, Inc.

(19-08160-F) - 001020

2018 AT-A-GLANCE

VAHealthcare
2019



300+

Attendees



40+

Expert Speakers



18

CME Credits
Available



8

Interactive
Workshops

VA Healthcare brings together senior level leaders in the VA, VHA, VBA, Military, Academia and Industry Executives to discuss policies, innovating practices, program and facility modernizations and advancements in AI and emerging technologies.



**CLICK HERE TO VIEW A
FULL BREAKDOWN OF PAST
ATTENDEES & ORGANIZATIONS**

(19-08160-1) 004024

TOP-NOTCH EXPERIENCES

VAHealthcare
2019

CONTINUING EDUCATION CREDITS

Knock out the majority of your CME, FACHE, CPHQ, ASWB credit requirements in this one event. No need to worry about them for the rest of the year! Have the opportunity to earn up to 18 credits!



DUAL TRACKED POST FOCUS DAY

Some topics require more depth and more conversation. Join us as we talk in more detail about Modernizing the VA and 21st Century Healthcare.



HEALTHHQ

Discover a dedicated VA space within the Exhibit Hall to help you facilitate more conversations with speakers or get more information about a specific programs This is the place to start!



LEADERSHIP KEYNOTES

Listen to leaders within the VA and healthcare community as we discuss 21st century care and innovating the delivery of care and benefits to our Nation's Veterans.



INTERACTIVE DISCUSSION GROUPS

Customize your experience with interactive learning opportunities. Pick from a variety of sessions to make sure your event experience is one to remember.



MORNING BREAKFAST BRIEF ON MENTAL HEALTH

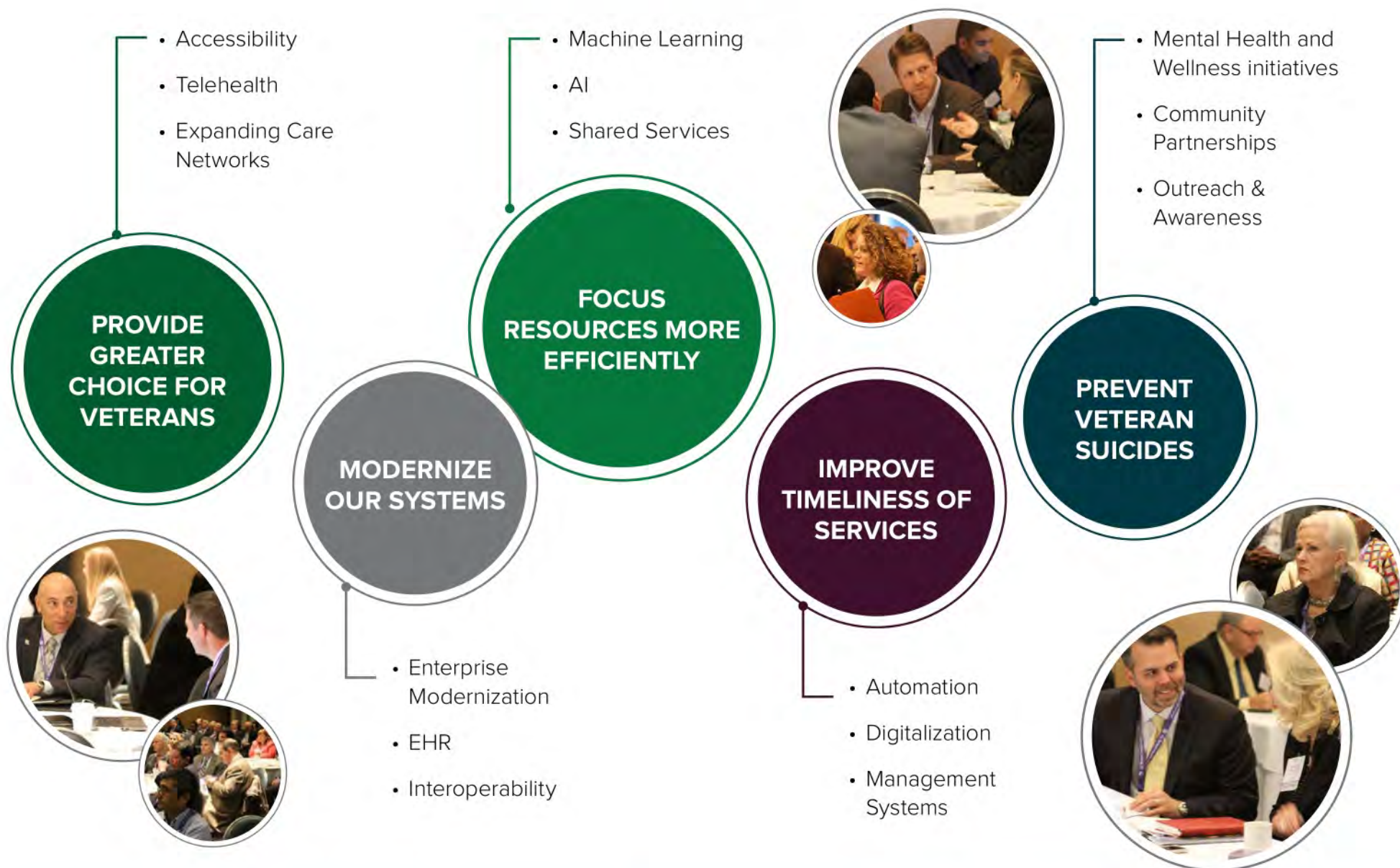
Open to all, attend our morning breakfast brief to discuss the advancements in mental health and best approaches to supporting veterans and their families.



(19-08160-F) - 001022

TACKLING THE VA'S TOP PRIORITIES

VAHealthcare
2019



(19-08160-F) - 001023



Veterans Appreciation Lounge

Relax and Recharge at the Veterans Appreciation Lounge. Make sure to take a step back and reflect on the sessions of the day and network with your peers in a relaxing lounge.



Hero Dogs

Improving the quality of life for our nation's heroes by raising, training and placing service dogs with lifetime partners.



22 Pushup Challenge

We encourage you to join us in HealthHQ as we get ready drop down for 22 pushups to promote awareness for suicide prevention and honor all military service members and veterans. All funds raised will be donated to a veteran non-profit agency.



Welcome Reception

After a long day of content on May 13th, enjoy a few drinks and more networking at our Reception. Listen to a special guest speaker and unwind after a long day.

MAIN SUMMIT DAY 1

Monday, May 13th, 2019

VAHealthcare
2019

8:00

REGISTRATION AND COFFEE

8:50

CHAIRPERSON'S OPENING ADDRESS

9:00

THE FUTURE OF THE VA AND HOW TO BUILD STRATEGIC PARTNERSHIPS AROUND OUR 5 TOP PRIORITIES

- Strategies for improving process management with private sector and community support
- Ensuring our nation's veterans receive high quality health care
- Enhancing veterans timely accessibility to benefits and services

Deborah Lafer Scher, Executive Advisor to the VA Secretary, Secretary's Center for Strategic Partnerships, [Department of Veterans Affairs](#)

10:00

CONNECTING RESEARCH TO EXTERNAL HOSPITALS

- How can the VA contribute to research and development efforts
- Complying with standards and innovating medical discoveries
- Collaborating with hospitals and external partners to further advancements

Valerie Li, Government and IDN Director, [Rauland](#)

10:30

MORNING NETWORKING BREAK AND START OF DEMO DRIVE

Network with VA and Industry attendees and Go visit our sponsor booths in the exhibit hall for a chance to enter yourself in the Demo Drive Prize Draw!

Also, Brief Remarks by Alan Macht Director of Sales and Marketing Action Manufacturing Inc.

TRACK A

THE USE OF NIV AS THE STANDARD OF CARE IN TREATING COPD & CHRONIC HYPERCAPNIC RESPIRATORY FAILURE

William D. Frazier, MD, CMO, [Viemed](#)

11:15

TRACK B

RESOURCE MANAGEMENT-APPLYING LEAN STRATEGIES TO IMPROVE EFFICIENCY, PRESENT QUALITY & REDUCE COSTS

- Creating a sense of unity across the VA
- Defining a roadmap for change management processes
- Leveraging communication as a tool to complement operations and upgrade veterans experience

Richard Griffith, Chief Strategy Officer, Veteran Health Indiana, [US Department of Veteran Affairs](#)

(19-08160-F) - 001025

12:15

MODERNIZING VA HOSPITALS AND FACILITIES: DELIVERING BETTER VETERAN EXPERIENCES

- Personalizing the veteran experience at your medical center
- Wayfinding: Aiding the journey from home to appointment
- Engaging with veterans via indoor GPS

Jeffrey Saura, Chief Technology Officer, **Orlando VA Medical Center (OVAMC)**

TRACK B-RESOURCE MANAGEMENT: REAL TIME INFORMATION SHARING TO SUPPORT REAL TIME NEEDS

- Determining and assessing the capability gaps of current systems
- Establishing requirements to promote the exchange of information sharing and drive EHR
- Developing a secured enterprise and interoperable systems

Tina Joros, JD, VP and General Manager, Open Business Unit and Financial Platforms, **Allscripts**

1:15

NETWORKING LUNCHEON

Halfway through the day. Here comes the final stretch! Be sure not to miss it!

INTERACTIVE DISCUSSION GROUPS (IDGS)

During this part of the conference, attendees will have the opportunity to pick from the interactive discussions groups of their choice below.

Each attendee will have the opportunity to select two topics and will rotate between their choices.

Discussion groups are kept small to ensure all attendees get the opportunity to ask their most pressing questions, ensuring a perfectly tailored experience.

DISCUSSION GROUP 1: EFFICIENCY

ACCESS AND USE: PRE- AND POST-ACUTE STROKE CARE

Dr. Huangang Jia, Research Health Scientist, **VA Center of Innovation on Disability and Rehabilitation Research**

Dr. Cowper Ripley, Acting Co-Director, **VA Center of Innovation on Disability & Rehab Research**

DISCUSSION GROUP 2: ACCESSIBILITY

SOLVING THE MEDICAL DEVICE & IOT SECURITY CHALLENGES

Jonathan Langer, CEO, **Medigate**

DISCUSSION GROUP 3: SUICIDE PREVENTION AND MENTAL HEALTH

MOBILE DIAGNOSTIC IMAGING: MAXIMIZING EFFICIENCY FOR RADIOLOGY

Steve Richter, SVP & General Manager, **Insight Imaging Mobile Solutions**

DISCUSSION GROUP 4: R&D DISCOVERY

THE ROLE OF PRO RESOLVING MEDIATORS FOR CHRONIC PAIN AND TBI IN THE VETERAN POPULATION

Dr. Robert Martindale, MD, Professor of Surgery, Chief of Gastrointestinal and General Surgery & Medical Director Hospital Nutritional Service, **Oregon Health Sciences University**

2:15

MAIN SUMMIT DAY 1

Monday, May 13th, 2019

VAHealthcare
2019

2:45

TRANSITIONAL PAIN SERVICE: A NOVEL APPROACH TO PERIOPERATIVE PAIN MANAGEMENT

Dr. Kimberlee Bayless, DNP, Nurse Practitioner & Director of the Transitional Pain Service, **George E. Wahlen Department of Veterans Affairs Medical Center**

Benjamin Brooke, MD, PHD, FACS, Chief, Division of Vascular Surgery, **University of Utah**

Michael J. Buys, MD, Anesthesiologist & Assistant Clinical Professor, **University of Utah**

Amy Beckstead, RN, MSN, Nurse Educator & Manager VA Regional Centers of **Innovation Specialty Care**

AN OVERVIEW OF OPIOID USE DISORDER (OUD) AND NEW TREATMENTS

Moderator:

Dr. Anne Andorn MD, CMO, **Indivior**

Panelists:

Dr. Ismene Petrakis, Chief of Psychiatry and Mental Health Service Line, **VA CT Healthcare System**

Barbara Haight, Pharm.D, Medical Affairs, **Indivior**

Katherian Weist, PhD

A TOOL IN THE TOOLBOX: IMPLEMENTING VA VIDEO CONNECT TO INCREASE ACCESS TO MENTAL HEALTH TREATMENT

Jan Lindsay, Ph.D., Director, Telebehavioral Health, **Michael E. DeBakey VA Medical Center**

HEALTH AND INDEPENDENT LIVING (HAIL) FOR RURAL VETERANS WITH DISABILITIES

Dr. Cowper Ripley, Acting Co-Director, **VA Center of Innovation on Disability & Rehab Research**

Dr. Huanguang Jia, Research Health Scientist, **VA Center of Innovation on Disability and Rehabilitation Research**

AFTERNOON NETWORKING & REFRESHMENT BREAK

3:45

Take this last opportunity to network with your peers and colleagues from across the industry to make sure you bring back as many new connections as possible! Get ready for our 22 Pushup Challenge to raise money and awareness for suicide prevention, proceeds will be donated to veteran non-profit agency.

4:15

KEYNOTE: VA MODERNIZATION PRIORITIES TO IMPROVE HEALTHCARE ACCESS AND QUALITY

- Future priorities and mandates to strengthen veterans services in the VA
- Priorities for providing care outside of the VA network to enhance accessibility

Surafeal Asgedom, Chief Modernization Officer, **U.S. Department of Veterans Affairs**

5:00

CHAIRPERSON'S CLOSING REMARKS

5:10

EVENING RECEPTION

Take sometime to unwind and continue the networking during our evening reception. Stay tuned to find out more about the entertainment!



MAIN SUMMIT DAY 2

Tuesday, May 14th, 2019

VAHealthcare
2019

8:00

REGISTRATION

8:45

CHAIRPERSON'S OPENING ADDRESSES

9:00

VBA'S TOP PRIORITIES TO GO FURTHER FOR VETERANS

- Providing Veterans with the benefits they have earned in a manner that honors their service
- Ensuring strong fiscal stewardship of the money entrusted to us by taxpayers
- Fostering a culture of collaboration

Margarita Devlin, Principal Deputy Under Secretary for Benefits, **U.S. Department of Veterans Affairs**

10:00

ADVANCES IN THE MANAGEMENT OF CAD/PAD: A NEW TREATMENT FOR THROMBOTIC RISK REDUCTION

Dr. Joshua Yamamoto, Cardiologist, **Georgetown University Hospital**

11:00

MORNING NETWORKING BREAK AND DEMO DRIVE PRIZES DRAW

Demo Drive Prizes will be announced before your break for more networking!

TRACK A

11:30

TRANSFORMATION: DEFINING A NEW VA

- Structuring the VA to be Veteran Centric in healthcare delivery and business services
- Advancing medical devices in the VA to support veterans needs
- Provide user friendly interfaces to support veteran experiences

Chakakhon Lea, Office of Information and Technology, **U.S. Department of Veterans Affairs**

12:15

EFFECTS OF NEW RULE CHANGES, VALUE BASED CARE AND BUNDLED PAYMENTS, ON PROVIDERS AS WELL AS PAYERS

- Interoperability within VA and community partners
- Changes in the health sector and VA

Dr. Don Kosiak, Senior Vice President & Chief Medical Officer, **Leidos**

TRACK B

SHORT, MEDIUM AND LONG TERM ACQUISITION PRIORITIES FOR THE VA TECHNOLOGY ACQUISITION CENTER

Frank Coluccio, Program Manager, Technology Acquisition Center, **Department of Veterans Affairs**

HEALTHCARE: CONNECTED CARE AND AI IN MEDICAL DEVICES

- What are the challenges with developing medical equipment to support ongoing veteran care
- Reducing patient access to care and emergency treatments by the seconds with AI and ML tools and applications
- Developing connected medical care devices to meet the VA's top priorities

William Cerniuk, Program Director, **VA Mobile Health** & VHA Technology Director, **U.S. Department of Veterans Affairs**

(19-08160-F) - 001028

MAIN SUMMIT DAY 2

Tuesday, May 14th, 2019

VAHealthcare
2019

12:45

NETWORKING LUNCHEON

1:45

TRAINING DOCTORS TO BE LEADERS TO IMPROVE HEALTHCARE

- Empowering doctors to lead
- Identifying cultural and organizational structures that need change
- Using the military model for training leadership

LTG (R) Mark Hertling, Author, Speaker & Contributor, [Physician Leadership Development](#)

2:45

AFTERNOON NETWORKING BREAK

What a day so far! While it's not quite over yet, take a few minutes to discuss your insights with fellow attendees and exchange business cards.

3:15

ADVANCE OUTPATIENT CARE FOR ADDICTION MANAGEMENT

Dr. Aldo Morales, Psychiatrist & Medical Director, [Retreat Behavioral Health](#)

3:45

PANEL DISCUSSION: CHALLENGES AND OPPORTUNITIES FOR VETERANS AFFAIRS DEPARTMENTS AROUND THE COUNTRY

- How States fill gaps in the continuum of services to Veterans and their families.
- Care of elders and severely disabled Veterans at the State level.
- State Women Veterans challenges and services and the Governors' suicide prevention challenge

Vito Imbasciani PhD MD, Secretary, [California Department of Veterans Affairs](#)

Col (R) Wanda Right, Director of Veteran Services, [Arizona State Government](#)

Alfie Alvarado-Ramos, Director, [Washington State Departments of Veterans Affairs](#)

Kelley Kash, CEO, [Maine Veteran's Homes](#)

4:45

CHAIRPERSON'S CLOSING REMARKS

5:00

END OF MAIN DAY 2!

(19-08160-F) - 001029

POST-CONFERENCE FOCUS DAY

Wednesday, May 15th, 2019

VAHealthcare
2019

8:00

REGISTRATION

8:50

CHAIRPERSON'S OPENING REMARKS

9:00

KEYNOTE: MODERNIZING THE LARGEST HEALTH CARE DELIVERY SYSTEM IN AMERICA

- Priorities for modernizing our IT infrastructure
- Integrating systems to enhance resource management
- DoD and VA Collaboration

Joseph Ronzio, Deputy Chief Health Technology Officer, **Department of Veterans Affairs**

10:00

IMPROVING VETERANS EXPERIENCE

- VA will increase Veteran trust in VA
- Incorporating Veteran experience data in all business processes to drive performance improvements in health care
- Deploying data science analytics based on near real time Veteran feedback

Dr. Lynda Davis, Chief Veterans Experience Officer, **U.S. Department of Veterans Affairs**

11:00

MORNING REFRESHMENT BREAK

Take a few minutes to recharge yourself before we jump into the next set of information packed sessions!

TRACK A MODERNIZATION

SPRAVATO™: THE FIRST NMDA RECEPTOR ANTAGONIST APPROVED, IN CONJUNCTION WITH AN ORAL ANTIDEPRESSANT, FOR ADULTS WITH TREATMENT-RESISTANT DEPRESSION

Dr. Moraima Trujillo, Psychiatrist, **Miami Veterans Affairs Healthcare System**

11:30

TRACK B HEALTHCARE

EXTRACT MEANINGFUL INSIGHTS FROM UNSTRUCTURED DATA: PRACTICAL USAGE OF AI/ML FOR DATA CLASSIFICATION AND INFORMATION EXTRACTION FROM UNSTRUCTURED ELECTRONIC HEALTHCARE RECORDS

- From pixels to bits – Optical/Intelligent Character Recognition with high confidence
- From bits to meaningful information – machine understands Natural Languages and medical terms
- From information to predictions, actions and better business results - document auto-classification and information auto-extraction

Jerry Zhou, Founder, Chief Innovation Officer and Artificial Intelligence and Machine Learning Evangelist, **Futrend Technology, Inc.**

(19-08160-F) - 001030

POST-CONFERENCE FOCUS DAY

Wednesday, May 15th, 2019

VAHealthcare
2019

12:30

NETWORKING LUNCHEON

All the morning hustle and bustle has probably made for a much-needed lunch break! Join us for a delicious lunch and make new friends at your table.

1:30

THE VETERANS AFFAIRS HOMELESS PROGRAM OFFICE'S APPROACH TO ENDING HOMELESSNESS

Monica Diaz, Executive director, **VHA Homeless Programs Office**

IMPROVING MINORITY VETERANS ACCESS TO VA BENEFITS AND SERVICES

- Minority veteran's access to quality healthcare/resources
- COL(R) Dennis O. May, Deputy Director, Center for Minority Veterans, **U.S. Department of Veterans Affairs**

2:30

AFTERNOON REFRESHMENT BREAK

Take a few minutes to recharge yourself!

3:00

IMPROVING COMMUNITY CARE TO PROVIDE QUALITY AND TIMELY HEALTHCARE TO VETERANS

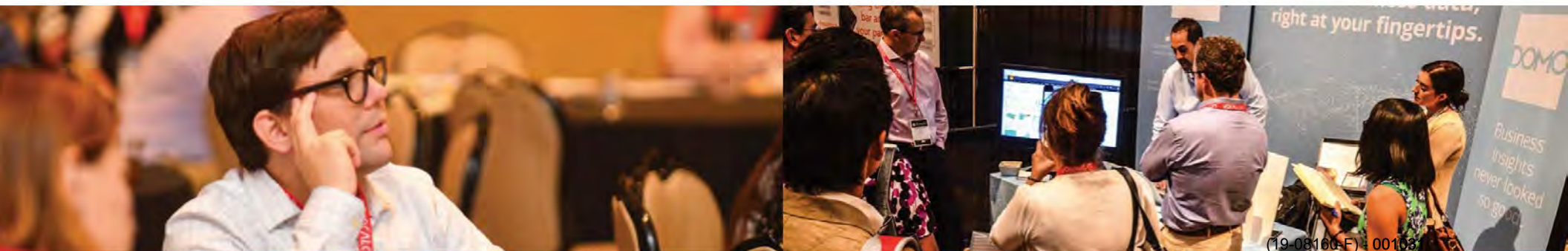
Jody Searight, Chief Care In The Community, **Department of Veterans Affairs**

IMPROVING WOMEN'S ACCESS TO VITAL HEALTH BENEFITS

- PTSD care
 - Female experience in the military
 - Women veteran's access to quality healthcare/resources
- Cherissa Jackson, Chief Medical Executive, **AMVETS**

4:00

CLOSING REMARKS



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Vinny Rama
Sales Director - North America

T: +1 212-885-2770
E: vinny.rama@iqpc.com

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Networking

Ensure that you have the opportunity to engage with the key decision makers within your industry.

Branding

Your company can be elevated to a position where they are seen as a market leader.

Thought Leadership

If you think that you should be viewed as a true industry leader then your need to demonstrate your market knowledge and expertise through a thought leadership opportunity, such as speaking or chairing.

(19-08160-F) - 001032

EVENT TEAM'S TOP PICKS FOR DC

Here are some of our teams favorite DC Things to do. Enjoy!



Changing of the Guard

Arlington National Cemetery
Arlington VA, 22211
877-907-8585

A solemn ceremony marking the transition of one guard to another over the Tomb of the Unknown Soldier.



City Segway Tours

502 23rd St NW
Washington, DC 20037
202-626-0017

Tour the DC landscape in style on Segway.



Marrakech Restaurant DC

2147 P Street NW
Washington, DC 20037
202-775-1882

A true immersion in Moroccan cuisine and culture.



Good Stuff Eatery

2110 Crystal Dr
Arlington, VA 22202
703-415-4663

Handcrafted burgers, fries & shakes served in upscale-industrial fast-food digs



DC Improv

1140 Connecticut Ave NW
Washington DC 20036
202-296-7008

Decades-old subterranean comedy club featuring national acts as well as local talent.



Drafthouse Comedy Theater

1100 13th St NW
Washington DC 20005

Modern, intimate comedy club featuring a lineup of local & national performers, plus beer & wine.



Smithsonian National Museum of Natural History

10th St & Constitution Ave. NW
Washington DC 20560
202-633-1000

From dinosaur exhibits to displays of rare gems, this acclaimed museum celebrates the natural world.



Smithsonian National Air and Space Museum

600 Independence Ave SW
Washington DC 20560
202-633-2214

Museum documenting the history of aviation & space exploration, with displays of vehicles & more.



The Hamilton

600 14th St NW
Washington DC 20005
202-787-1000

Trendy American eatery with a late-night menu plus plenty of room for a live music space downstairs.



(19-08160-F) - 001033

PRICING & REGISTRATION

VAHealthcare
2019

3 EASY WAYS TO
PURCHASE YOUR PASS

Email
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ACTIVE U.S. GOVERNMENT, MILITARY	
3 DAY ALL-ACCESS PASS: MAIN CONFERENCE + FOCUS DAY	NO COST TO ALL ACTIVE U.S. MILITARY AND GOVERNMENT EMPLOYEES All Active U.S. Federal Employees, to include Military Personnel, will be granted free admission to our event. However, in order to logistically support this event, we must require online pre-registration. Onsite registration will not be permitted and Online Registration will close on 5/13/2019.
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FOCUS DAY	\$595
VENDORS, CONSULTANTS, AND SOLUTION PROVIDERS	STANDARD
2 DAY MAIN CONFERENCE	\$1,515
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FOCUS DAY	\$750

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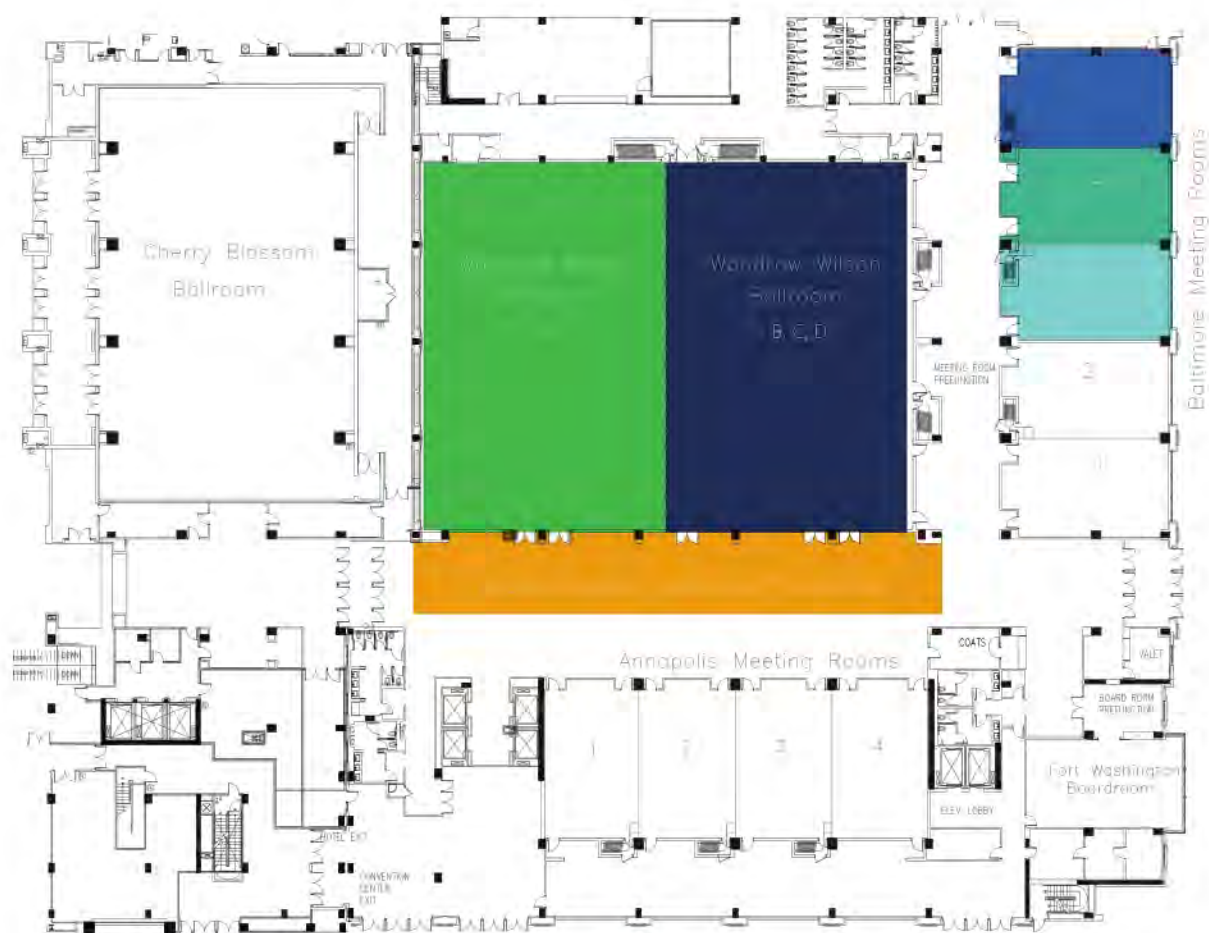
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Groups of 3 to 4	10%
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(19-08160-F) - 001034



Monday, May 13th | Main Summit Day One

Main Summit Day One Registration
 General Session
 Exhibit Hall & Networking Breaks
 Veteran Appreciation Lounge
 Track A
 Track B
 Networking Lunch
 Interactive Discussion Group 1
 Interactive Discussion Group 2
 Interactive Discussion Group 3
 Interactive Discussion Group 4
 Evening Reception

Woodrow Wilson Ballroom Prefunction
 Woodrow Wilson Ballroom A
 Woodrow Wilson Ballroom B, C, D
 Woodrow Wilson Ballroom B, C, D
 Woodrow Wilson Ballroom A
 Baltimore Meeting Room 3, 4, 5
 Woodrow Wilson Ballroom B, C, D
 Baltimore Meeting Room 4
 Baltimore Meeting Room 5
 Baltimore Meeting Room 3
 Woodrow Wilson Ballroom A
 Woodrow Wilson Ballroom B, C, D

Tuesday, May 14th | Main Summit Day Two

Main Summit Day Two Registration
 General Session
 Exhibit Hall & Networking Breaks
 Veteran Appreciation Lounge
 Track A
 Track B
 Networking Lunch

Woodrow Wilson Ballroom Prefunction
 Woodrow Wilson Ballroom A
 Woodrow Wilson Ballroom B, C, D
 Woodrow Wilson Ballroom B, C, D
 Woodrow Wilson Ballroom A
 Baltimore Meeting Room 3, 4, 5
 Woodrow Wilson Ballroom B, C, D

Wednesday, May 15th | Post-Conference Focus Day

Focus Day Registration
 Track A
 Track B
 Networking Breaks & Networking Lunch

Woodrow Wilson Ballroom Prefunction
 Baltimore Meeting Room 5
 Baltimore Meeting Room 4
 Baltimore Meeting Room 3

From: Manji, Hussein [JRDUS]
Sent: 4 May 2019 12:18:02 +0000
To: Scher, Deborah L.
Subject: [EXTERNAL] Re: Update

Hi Deborah

Thank you for your note, and delighted to hear the quick response from my colleagues. Yes, agree -- while it's a very, very important position, it may need knocking on a number of doors to find the *exact individual*. In this regard, could I ask your thoughts in terms of "rank ordering" what you would consider the most important attributes/qualities/experience of a very suitable candidate? As we discussed, there are a number of ideal characteristics, but it may make sense to characterize which ones are most important ones. Then I will absolutely try to think of other suitable individuals.

Coincidentally, I am chairing the American Federation for Suicide Prevention Gala in NYC this Tuesday...and that may also trigger some thoughts as I will likely be with a number of people passionate about this cause

Take care

Hussein

From: Scher, Deborah L. <Deborah.Scher@va.gov>
Sent: Saturday, May 4, 2019 8:09 AM
To: Manji, Hussein [JRDUS]
Subject: [EXTERNAL] Update

Good Morning Hussein:

Circling back to let you know that I received a quick response from all three physicians.

(b)(6) and I already connected late yesterday and I am scheduled to speak with both (b)(6) and (b)(6) this afternoon. Clearly your referral created a sense of excitement and urgency!

As you might imagine, candidates are passionate in their commitment to this undertaking but like you many have important reasons why it would be extremely difficult for them to leave what they are doing for a full year. While we can structure some flexibility into this role, we do need a significant commitment in order to truly make progress.

Might I impose upon you to give some thought to exceptional leaders in the field who are perhaps about to step down from important roles, are planning to retire in the near future or who have recently retired?

Thank you in advance for your consideration and for your partnership on this.

With much appreciation,

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
US Department of Veterans Affairs

From: Manji, Hussein [JRDUS] (b)(6)@its.jnj.com>
Date: Friday, May 03, 2019, 2:26 PM
To: Scher, Deborah L. <Deborah.Scher@va.gov>
Subject: [EXTERNAL] RE: Introduction to Dr. Manji

Hi Deborah

Absolutely – thank you. Same here....my cell number is (b)(6)

Take care

Hussein

From: "Scher, Deborah L." <Deborah.Scher@va.gov>
Date: Friday, May 3, 2019 at 2:19 PM
To: HUSSEINI MANJI (b)(6)@its.jnj.com>
Subject: [EXTERNAL] RE: Introduction to Dr. Manji

Dear Hussein:

Thank you very much for making time to speak with me and for sharing these suggestions. If you would like to have a follow-up conversation over the weekend, this is my most important priority. My cell is 202-820-3864.

With much appreciation,

Deborah
Deborah Lafer Scher

Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
US Department of Veterans Affairs
[Follow us on Twitter](#)

From: Manji, Hussein [JRDUS] (b)(6)@its.jnj.com>
Sent: Friday, May 3, 2019 2:01 PM
To: Scher, Deborah L. <Deborah.Scher@va.gov>
Subject: [EXTERNAL] Introduction to Dr. Manji

Dear Deborah

It was a real pleasure speaking a few minutes ago. As mentioned, I look forward to assisting in this endeavor – we absolutely have to make a difference.

Here are some of the names we discussed. As mentioned, feel free to use my name.

1. (b)(6)@kp.org
[\(b\)\(6\)](https://www.kpashingtonresearch.org/our-research/our-scientists)
(b)(6) /
2. (b)(6)@partners.org
[\(b\)\(6\)](https://www.mcleanhospital.org/biography)
3. (b)(6)@ucsd.edu [\(b\)\(6\)](https://profiles.ucsd.edu)

Best wishes

Husseini

From: "Scher, Deborah L." <Deborah.Scher@va.gov>
Date: Monday, April 29, 2019 at 4:41 PM
To: (b)(6) [SCGUS]" (b)(6)@its.jnj.com>
Cc: HUSSEINI MANJI <HManji@its.jnj.com>
Subject: RE: [EXTERNAL] Introduction to Dr. Manji

Dear (b)(6)

Thank you very much for going out of your way to make this helpful introduction and for doing it so quickly.

Dear Dr. Manji:

It is an absolute pleasure to meet you by email. Thank you in advance for your generosity in agreeing to make time to discuss this mission critical position.

If you might point me in the direction of the person who manages your calendar, we will reach out to arrange a time.

With much appreciation,

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
US Department of Veterans Affairs

From: (b)(6) [SCGUS] (b)(6)@its.jnj.com>
Date: Monday, Apr 29, 2019, 11:54 AM
To: Scher, Deborah L. <Deborah.Scher@va.gov>
Cc: Manji, Hussein [JRDUS] (b)(6)@its.jnj.com>
Subject: [EXTERNAL] Introduction to Dr. Manji

Deborah,
I was able to connect with Dr. Manji today and wanted give him a brief synopsis of the role for which you are looking to fill. I have copied him above and have shared the job description as well.

I will let you both take it from here to talk live.

Thank you for trusting us enough to share this new role and seek candidates inside the J&J family.

(b)(6)
Field Director Federal Team/ Strategic Engagement
Strategic Customer Group

 HEALTH CARE SYSTEMS INC.

Mobile: (b)(6)
Fax: 866.485.2348
E-Mail: (b)(6)@its.jnj.com

Providing services for Janssen Pharmaceutical Companies of Johnson & Johnson

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transmission in error, please reply to the sender, so that Johnson & Johnson can arrange for proper delivery, and then please delete the message from your inbox. Thank you.

From: Scher, Deborah L. <Deborah.Scher@va.gov>

Sent: Friday, April 26, 2019 10:48 AM

To: (b)(6) SCGUS] (b)(6) @its.jnj.com>

Subject: [EXTERNAL] Call Follow-up

Dear (b)(6)

As we discussed. Thank you in advance for helping us identify the best candidates for this critical position. I look forward to our follow-up conversation.

Enjoy your time with your son this weekend!

Warm regards,

Deborah

Deborah Lafer Scher

Executive Advisor to the Secretary

Secretary's Center for Strategic Partnerships

US Department of Veterans Affairs

[Follow us on Twitter](#)

From: Scher, Deborah L.
Sent: 5 May 2019 17:23:09 +0000
To: Manji, Hussein [JRDUS]
Subject: RE: [EXTERNAL] Re: Update

Hi Hussein:

Thank you for sharing these insights. They are extraordinarily helpful.

I have been interviewing over the weekend and will include these recommendations in my outreach.

My sincerest apologies for the time I have taken away from your weekend.

Warmest regards,

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
US Department of Veterans Affairs

From: Manji, Hussein [JRDUS] <(b)(6)@its.jnj.com>
Date: Sunday, May 05, 2019, 11:35 AM
To: Scher, Deborah L. <Deborah.Scher@va.gov>
Subject: [EXTERNAL] Re: Update

Hi Deborah

Thanks very much for the very thoughtful (but challenging!) criteria. Based on those, I think that (b)(6) and (b)(6) would fit the bill in terms of considerable leadership/administrative experience and name recognition that would help "open doors". Unfortunately I don't believe that either has first-hand experience directly working in Govt. By contrast, (b)(6) likely has broad experience, and I believe has also worked as a special asst to the NIMH Director, and so likely has some first hand Govt experience

Will continue to think about suitable people

best

Hussein

From: Scher, Deborah L. <Deborah.Scher@va.gov>
Sent: Saturday, May 4, 2019 3:58 PM
To: Manji, Hussein [JRDUS]
Subject: RE: [EXTERNAL] Re: Update

Hi Hussein:

Thank you very much for being my thought partner on this, particularly on the weekend.

I am combining my responses to both of your helpful notes. You raised an important set of questions this morning about the most critical attributes for this position.

First and foremost, this person must be an exceptional leader, a partner to the Secretary to help galvanize the county around this issue with passion and purpose. They must be an experienced coalition builder and an articulate and inspiring communicator. While they should have credibility around mental health, they do not need to be a physician or research SME. Someone who when others hear their name are convinced that this will not be just another government task force, that something meaningful and impactful will actually get done.

Second, because government operates so differently from other sectors, as you well know, and it can take a while to move up the learning curve, it would be helpful if candidates had some government exposure.

Finally, we are seeking a candidate with that rare quality that I heard people use when describing you, that when Dr. Manji asks, it is extremely difficult, if not impossible to say no to him!

I would be curious as to how you would rate the people below using this criteria and appreciate your very generous offer to keep this position in mind as you chair the annual dinner on Tuesday night.

With much gratitude,

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
US Department of Veterans Affairs

From: [REDACTED] [JRDUS] [REDACTED] <[\[REDACTED\]@its.ini.com](mailto:[REDACTED]@its.ini.com)>
Date: Saturday, May 04, 2019, 9:06 AM

To: Scher, Deborah L. <Deborah.Scher@va.gov>

Subject: [EXTERNAL] Re: Update

Hi Deborah

A few more thoughts based on your note below

1) (b)(6) -- was Chair of Psychiatry at Penn for a number of years. Stepped down from that role ? ~2-3 years ago because of "term limit". Still at Penn as a faculty member . <https://www.med.upenn.edu/apps/faculty/index.php/g275/p19812> .

(b)(6) @mail.med.upenn.edu

2) (b)(6) -- senior leadership roles in numerous organizations over the years. At Columbia Univ, largely spearheading their quality and outcomes research [https://www.columbiapsychiatry.org/profile/\(b\)\(6\).md](https://www.columbiapsychiatry.org/profile/(b)(6).md) .

(b)(6) @nyspi.columbia.edu

3) (b)(6) -- at UTSW in a senior leadership role. And was "second in command" for the the landmark NIMH treatment of depression STAR*D study. Has now retired from there, and is primarily consulting [https://utswmed.org/doctors/\(b\)\(6\)](https://utswmed.org/doctors/(b)(6))

(b)(6) / . (b)(6) @utsouthwestern.edu

4) (b)(6) -- Exec Director of a Suicide Prevention Organization, SAVE <https://save.org/who-we-are/> . (b)(6) @save.org

5) (b)(6) -- senior executive at the Foundation for the NIH....which, as you likely know, manages numerous public-private partnerships [https://fnihi.org/about/staff/\(b\)\(6\).pdf](https://fnihi.org/about/staff/(b)(6).pdf)

6) (b)(6) -- chairman of Psychiatry at Univ of Wisconsin for a number of years. Also recently appointed Editor of the American Journal of Psychiatry. Here, if he's interested, he may need to be able to continue to be Editor (assume that wouldn't be a problem, since I was Editor of journals while at the NIH, although I recognize that NIH/VA rules may be different)

[https://www.psychiatry.wisc.edu/staff/\(b\)\(6\).pdf](https://www.psychiatry.wisc.edu/staff/(b)(6).pdf) @wisc.edu

I'll keep thinking!

Best

(b)(6)

From: Scher, Deborah L. <Deborah.Scher@va.gov>

Sent: Saturday, May 4, 2019 8:09 AM

To: Manji, Hussein [JRDUS]

Subject: [EXTERNAL] Update

Good Morning Hussein:

Circling back to let you know that I received a quick response from all three physicians.

(b)(6) and I already connected late yesterday and I am scheduled to speak with both (b)(6) and (b)(6) this afternoon. Clearly your referral created a sense of excitement and urgency!

As you might imagine, candidates are passionate in their commitment to this undertaking but like you many have important reasons why it would be extremely difficult for them to leave what they are doing for a full year. While we can structure some flexibility into this role, we do need a significant commitment in order to truly make progress.

Might I impose upon you to give some thought to exceptional leaders in the field who are perhaps about to step down from important roles, are planning to retire in the near future or who have recently retired?

Thank you in advance for your consideration and for your partnership on this.

With much appreciation,

Deborah

Deborah Lafer Scher

Executive Advisor to the Secretary

Secretary's Center for Strategic Partnerships

US Department of Veterans Affairs

From: Manji, Hussein [JRDUS] (b)(6) @its.inj.com>

Date: Friday, May 03, 2019, 2:26 PM

To: Scher, Deborah L. <Deborah.Scher@va.gov>

Subject: [EXTERNAL] RE: Introduction to Dr. Manji

Hi Deborah

Absolutely – thank you. Same here....my cell number is (b)(6)

Take care

Husseini

From: "Scher, Deborah L." <Deborah.Scher@va.gov>
Date: Friday, May 3, 2019 at 2:19 PM
To: HUSSEINI MANJI (b)(6)@its.jnj.com>
Subject: [EXTERNAL] RE: Introduction to Dr. Manji

Dear Hussein:

Thank you very much for making time to speak with me and for sharing these suggestions. If you would like to have a follow-up conversation over the weekend, this is my most important priority. My cell is 202-820-3864.

With much appreciation,

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
US Department of Veterans Affairs
[Follow us on Twitter](#)

From: Manji, Hussein [JRDUS] (b)(6)@its.jnj.com>
Sent: Friday, May 3, 2019 2:01 PM
To: Scher, Deborah L. <Deborah.Scher@va.gov>
Subject: [EXTERNAL] Introduction to Dr. Manji

Dear Deborah

It was a real pleasure speaking a few minutes ago. As mentioned, I look forward to assisting in this endeavor – we absolutely have to make a difference.

Here are some of the names we discussed. As mentioned, feel free to use my name.

1. (b)(6)@kp.org
[\(b\)\(6\)@kp.org](https://www.kpashingtonresearch.org/our-research/our-scientists)
(b)(6)

2. (b)(6)@partners.org
<https://www.mcleanhospital.org/biography> (b)(6)
3. (b)(6)@ucsd.edu <https://profiles.ucsd.edu> (b)(6)

Best wishes

Husseini

From: "Scher, Deborah L." <Deborah.Scher@va.gov>
Date: Monday, April 29, 2019 at 4:41 PM
To: (b)(6) [SCGUS] (b)(6)@its.jnj.com>
Cc: HUSSEINI MANJI <(b)(6)@its.jnj.com>
Subject: RE: [EXTERNAL] Introduction to Dr. Manji

Dear (b)(6)

Thank you very much for going out of your way to make this helpful introduction and for doing it so quickly.

Dear Dr. Manji:

It is an absolute pleasure to meet you by email. Thank you in advance for your generosity in agreeing to make time to discuss this mission critical position.

If you might point me in the direction of the person who manages your calendar, we will reach out to arrange a time.

With much appreciation,

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
US Department of Veterans Affairs

From: (b)(6) [SCGUS] (b)(6)@its.jnj.com>
Date: Monday, Apr 29, 2019, 11:54 AM
To: Scher, Deborah L. <Deborah.Scher@va.gov>
Cc: Manji, Husseini [JRDUS] (b)(6)@its.jnj.com>
Subject: [EXTERNAL] Introduction to Dr. Manji

Deborah,

I was able to connect with Dr. (b)(6) today and wanted give him a brief synopsis of the role for which you are looking to fill. I have copied him above and have shared the job description as well.

I will let you both take it from here to talk live.

Thank you for trusting us enough to share this new role and seek candidates inside the J&J family.

(b)(6)

Field Director Federal Team/ Strategic Engagement
Strategic Customer Group

Johnson & Johnson HEALTH CARE SYSTEMS INC.

Mobile: (b)(6)

Fax: 866.485.2348

E-Mail: (b)(6)@its.jnj.com

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From: Scher, Deborah L. <Deborah.Scher@va.gov>

Sent: Friday, April 26, 2019 10:48 AM

To: (b)(6) [SCGUS] (b)(6)@its.jnj.com>

Subject: [EXTERNAL] Call Follow-up

Dear (b)(6)

As we discussed. Thank you in advance for helping us identify the best candidates for this critical position. I look forward to our follow-up conversation.

Enjoy your time with your son this weekend!

Warm regards,

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
US Department of Veterans Affairs
[Follow us on Twitter](#)

From: (b)(6) [SCGUS]
Sent: 6 May 2019 19:30:17 +0000
To: Scher, Deborah L.
Cc: (b)(6) [SCGUS]
Subject: [EXTERNAL] Re: Internal VA JLABS follow up discussion

If those dates don't work, please have (b)(6) forward additional dates so we can try to backend into them from our end.

Prom was fantastic. Mom was a little tired but (b)(6) he was smiling all weekend.

(b)(6)
Field Director Federal/ Strategic Engagement
Strategic Customer Group
Johnson & Johnson Healthcare Systems
C- (b)(6)
(b)(6)@its.jnj.com
[HTTPS://WWW.JNJ.COM/HEROES](https://www.jnj.com/heroes)

From: Scher, Deborah L. <deborah.scher@va.gov>
Sent: Monday, May 6, 2019 2:35 PM
To: (b)(6) [SCGUS]
Cc: (b)(6) [SCGUS]
Subject: [EXTERNAL] RE: Internal VA JLABS follow up discussion

Dea (b)(6)
Too bad. I know that date worked for her and her schedule is packed. (b)(6) will check on these June dates.

Thank you for letting us know. Hope the Prom was wonderful,
Deborah

From: (b)(6) [SCGUS] (b)(6)@its.jnj.com>
Sent: Monday, May 6, 2019 11:39 AM
To: Scher, Deborah L. <Deborah.Scher@va.gov>
Cc: (b)(6) [SCGUS] (b)(6)@its.jnj.com>
Subject: [EXTERNAL] Fwd: Internal VA JLABS follow up discussion

Deborah
Good Monday morning. I received this email over the weekend and since I was all caught up with the Prom I wanted to get this out to you as soon as I could.

As you can see they would like to include experts from both our Mental Health and Women's Health sectors which I am very happy about.

Do you think this new date would work for you and Dr. Clancy?

At least we are not straddling memorial weekend and I am not pushed with my sons graduation.

Sent from my iPhone

(b)(6)
Johnson & Johnson Healthcare Systems
Field Director Federal Team/ Strategic Engagement
(b)(6)
(b)(6)@its.jnj.com

Begin forwarded message:

From: (b)(6) [JRDUS]" (b)(6)@ITS.JNJ.com>
Date: May 4, 2019 at 10:25:43 AM EDT
To: (b)(6) [SCGUS]" (b)(6)
[SCGUS]" (b)(6)@its.jnj.com>
Cc: (b)(6) [US]" (b)(6)@its.jnj.com>
Subject: Re: Internal VA JLABS follow up discussion

Hi (b)(6) and (b)(6)

Hope all is well. Couple items:

(b)(6) now has an urgent conflict the last week of May and will no longer be able to attend the meeting. Can we see if the VA can move the meeting to the following week on 6/5 or 6/6?

-we would like to organize experts from our mental health, women's health, etc teams to be in attendance for the meeting but to coordinate we would like to know whom will be in the room from the VA. Calendars are getting booked so it would be helpful to get the list of attendees from the VA. Is that something you can share?

Thanks!

(b)(6)

(b)(6)

On May 2, 2019, at 1:04 PM (b)(6) [SCGUS] (b)(6)@its.jnj.com>
wrote:

Hi (b)(6)

(b)(6) and I would be happy to get on a call next week. Can you schedule with (b)(6) (copied on Email). Thank you and we look forward to connecting.

(b)(6)

Sent from my iPad

On May 2, 2019, at 3:51 PM, (b)(6) JRDUS] <(b)(6)@its.jnj.com> wrote:

Hi (b)(6) and (b)(6)

Hope you are doing well. Wanted to follow up on the note below to see about scheduling a call for early next week in preparation for the larger group discussion next Friday. Also, checking on the two other items 1) any updates to the notes we consolidated, and 2) whom from the VA will be in attendance at the meeting on the 28th.

Thanks in advance and happy to hop on the phone to discuss any of the above.

Take care,

Erika

(b)(6)

Director, Sourcing Innovation

<image001.jpg> (b)(6)

<image002.jpg> (b)(6)@its.jnj.com

<image003.jpg>

Connect with JLABS:

<image004.png> <image005.png> <image006.png>

<image007.png>

From: (b)(6) JRDUS]

Sent: Wednesday, May 1, 2019 12:00 PM

To: (b)(6) [SCGUS]

(b)(6)@its.jnj.com> (b)(6) [SCGUS]

(b)(6)@its.jnj.com>

Cc: (b)(6) [CNTUS] <(b)(6)@its.jnj.com>;

(b)(6) [US] <(b)(6)@its.jnj.com>

Subject: RE: Internal VA JLABS follow up discussion

Importance: High

Hi (b)(6) and (b)(6)

Hope all is well. Looking forward to the discussion next week in preparation for our meeting with the VA on May 28th. We were putting our thoughts together on the JLABS site and

thought it would be useful to have a pre-prep meeting with a small subset of the larger group (Melinda, (b)(6) and I) to prepare a draft agenda, etc. Do you have time tomorrow (Thursday) or early next week to connect?

Also, a couple questions:

1. Attached are the consolidated notes from our side from the meeting in April, can you review and add any additional items? We would like to send these over to the VA as a follow up.
2. Do you know who is coming from the VA on the 28th? Also, who is coming from the attendees on the calendar entry? This will be helpful for us as we space plan for our meeting and frame the agenda.

Looking forward to connecting shortly and let me know if you have any questions.

Take care,

(b)(6)

Director, Sourcing Innovation

<image001.jpg> (b)(6)

<image002.jpg> (b)(6) @its.inj.com

<image003.jpg>

Connect with JLABS:

<image004.png> <image005.png> <image006.png>

<image007.png>

-----Original Appointment-----

From: (b)(6) [SCGUS]

Sent: Thursday, April 25, 2019 1:41 PM

To: (b)(6) [SCGUS]; (b)(6)

[JAN]; Richter, Melinda [JRDUS]; (b)(6)

[SCGUS]; (b)(6) [JRDUS]; (b)(6) [JJCUS]; (b)(6)

(b)(6) [JJCUS]; (b)(6) [CNTUS]

Cc: (b)(6) [JJCUS]; (b)(6) [JJCUS]

Subject: Internal VA JLABS follow up discussion

When: Friday, May 10, 2019 3:00 PM-4:00 PM (UTC-05:00) Eastern Time (US & Canada).

Where: Skype Meeting

We needed to reschedule this call due to key participant conflicts.

Thank you for your flexibility.

(b)(6)

[Join Skype Meeting](#)

Trouble Joining? [Try Skype Web App](#)

Join by phone

Toll number: +1 (908) 316-2436, (b)(6) # (Dial-in
Number) English (United States)

[Find a local number](#)

Conference ID (b)(6)

[Forgot your dial-in PIN? | Help](#)

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1. "Use Skype for Business (full audio and video experience)" Select ONLY if you are using a USB connected Audio Device and have a good network connection (DO NOT SELECT THIS OPTION IF YOU ARE DIALING IN FROM A PHONE)
2. "Call Me at" Select if you have a phone that can be directly dialed (not supported in all countries).
3. "Don't join audio" Select if you will be dialing into the meeting from your phone.

Please note that J&J Skype for Business Meetings allow J&J meeting presenters to optionally record audio and other information shared during the meeting session, including any Instant Messages sent in the meeting. If a meeting presenter wishes to utilize the recording feature, the presenter should notify participants at the beginning of the meeting. Recorded participants will also be notified with either an audio or visual indication depending on how the participant is joined to the meeting. If you do not consent to being recorded, please discuss your concerns with the meeting organizer either prior to or at the beginning of the meeting, or do not join the meeting.

From: (b)(6) [SCGUS]
Sent: 7 May 2019 00:42:35 +0000
To: Scher, Deborah L.
Subject: [EXTERNAL] Re: Internal VA JLABS follow up discussion

Let me see if I can get some other dates.

(b)(6)

Field Director Federal/ Strategic Engagement

Strategic Customer Group

Johnson & Johnson Healthcare Systems

C- (b)(6)

E- (b)(6)@its.jnj.com

[HTTPS://WWW.JNJ.COM/HEROES](https://www.jnj.com/heroes)

From: Scher, Deborah L. <deborah.scher@va.gov>

Sent: Monday, May 6, 2019 7:50 PM

To: (b)(6) [SCGUS]

Subject: RE: [EXTERNAL] Re: Internal VA JLABS follow up discussion

(b)(6)

Thank you for letting me know.

Dr. Clancy is confirmed for May 28, but is out of town the week of the fifth. Waiting to hear from her EA about other dates. Did you have something else in mind for June that works with your team?

Have a good evening,

Deborah

Deborah Lafer Scher

Executive Advisor to the Secretary

Secretary's Center for Strategic Partnerships

US Department of Veterans Affairs

From: (b)(6) [SCGUS] <(b)(6)@its.jnj.com>

Date: Monday, May 06, 2019, 7:40 PM

To: Scher, Deborah L. <Deborah.Scher@va.gov>

Subject: [EXTERNAL] Re: Internal VA JLABS follow up discussion

Deborah

After looking at our schedule, we might need to lean more toward June 6th vs. June 5th.

But as I said before, let me know if neither of these dates work and I can help to get us aligned.

We are having our pre call meeting with the JLABS people this Friday, so i might be easier for me to sell another date when everyone is on the phone live.

Hope you had a good Monday.

(b)(6)

Field Director Federal/ Strategic Engagement

Strategic Customer Group

Johnson & Johnson Healthcare Systems

C (b)(6)

E (b)(6)@its.jnj.com

[HTTPS://WWW.JNJ.COM/HEROES](https://www.jnj.com/heroes)

From: Scher, Deborah L. <deborah.scher@va.gov>

Sent: Monday, May 6, 2019 2:35 PM

To: (b)(6) [SCGUS]

Cc: (b)(6) [SCGUS]

Subject: [EXTERNAL] RE: Internal VA JLABS follow up discussion

Dear (b)(6)

Too bad. I know that date worked for her and her schedule is packed. (b)(6) will check on these June dates.

Thank you for letting us know. Hope the Prom was wonderful,
Deborah

From: (b)(6) [SCGUS] (b)(6)@its.jnj.com>

Sent: Monday, May 6, 2019 11:39 AM

To: Scher, Deborah L. <Deborah.Scher@va.gov>

Cc: (b)(6) [SCGUS] (b)(6)@its.jnj.com>

Subject: [EXTERNAL] Fwd: Internal VA JLABS follow up discussion

Deborah

Good Monday morning. I received this email over the weekend and since I was all caught up with the Prom I wanted to get this out to you as soon as I could.

As you can see they would like to include experts from both our Mental Health and Women's Health sectors which I am very happy about.

Do you think this new date would work for you and Dr. Clancy?

At least we are not straddling memorial weekend and I am not pushed with my sons graduation.

Sent from my iPhone

(b)(6)

Johnson & Johnson Healthcare Systems
Field Director Federal Team/ Strategic Engagement

(b)(6)

(b)(6)@its.jnj.com

Begin forwarded message:

From: (b)(6) [JRDUS]" (b)(6)@ITS.JNJ.com>

Date: May 4, 2019 at 10:25:43 AM EDT

To: (b)(6) [SCGUS]" (b)(6)@its.jnj.com> (b)(6)

[SCGUS]" (b)(6)@its.jnj.com>

Cc: (b)(6) [US]" (b)(6)@its.jnj.com>

Subject: Re: Internal VA JLABS follow up discussion

H (b)(6) nd (b)(6)

Hope all is well. Couple items:

(b)(6) now has an urgent conflict the last week of May and will no longer be able to attend the meeting. Can we see if the VA can move the meeting to the following week on 6/5 or 6/6?

-we would like to organize experts from our mental health, women's health, etc teams to be in attendance for the meeting but to coordinate we would like to

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Thanks!

(b)(6)

(b)(6)

On May 2, 2019, at 1:04 PM, (b)(6) [SCGUS] (b)(6) @its.inj.com> wrote:

Hi (b)(6)

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(b)(6)

Sent from my iPad

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Hi (b)(6) and (b)(6)

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Thanks in advance and happy to hop on the phone to discuss any of the above.

Take care,

(b)(6)

(b)(6)

Director, Sourcing Innovation

<image001.jpg> (b)(6)

<image002.jpg> (b)(6) @its.jnj.com

<image003.jpg>

Connect with JLABS:

<image004.png> <image005.png> <image006.png>

<image007.png>

From (b)(6) JRDUS]

Sent: Wednesday, May 1, 2019 12:00 PM

To (b)(6) [SCGUS]

(b)(6) @its.jnj.com> (b)(6) [SCGUS]

(b)(6) @its.jnj.com>

Cc (b)(6) [CNTUS] (b)(6) @its.jnj.com>;

(b)(6) [US] (b)(6) @its.jnj.com>

Subject: RE: Internal VA JLABS follow up discussion

Importance: High

Hi (b)(6) and (b)(6)

Hope all is well. Looking forward to the discussion next week in preparation for our meeting with the VA on May 28th. We were putting our thoughts together on the JLABS site and thought it would be useful to have a pre-prep meeting with a small subset of the larger group (b)(6) and I)

to prepare a draft agenda, etc. Do you have time tomorrow (Thursday) or early next week to connect?

Also, a couple questions:

1. Attached are the consolidated notes from our side from the meeting in April, can you review and add any additional items? We would like to send these over to the VA as a follow up.
2. Do you know who is coming from the VA on the 28th? Also, who is coming from the attendees on the calendar entry? This will be helpful for us as we space plan for our meeting and frame the agenda.

Looking forward to connecting shortly and let me know if you have any questions.

Take care,

(b)(6)

Director, Sourcing Innovation

<image001.jpg> (b)(6)

<image002.jpg> (b)(6) @its.jnj.com

<image003.jpg>

Connect with JLABS:

<image004.png> <image005.png> <image006.png>

<image007.png>

-----Original Appointment-----

From: (b)(6) [SCGUS]

Sent: Thursday, April 25, 2019 1:41 PM

To: (b)(6) [SCGUS]; (b)(6)

[JAN]; Richter, Melinda [JRDUS] (b)(6)

[SCGUS] (b)(6) [JRDUS] (b)(6) [JJCUS]; (b)(6)

(b)(6) [JJCUS]; (b)(6) [CNTUS]

Cc: (b)(6) [JJCUS]; (b)(6) [JJCUS]

Subject: Internal VA JLABS follow up discussion

When: Friday, May 10, 2019 3:00 PM-4:00 PM (UTC-05:00) Eastern Time (US & Canada).

Where: Skype Meeting

We needed to reschedule this call due to key participant conflicts.

Thank you for your flexibility.

(b)(6)

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Toll number: +1 (908) 316-2436, (b)(6) Dial-in
Number) English (United States)

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Conference ID: (b)(6)

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.....
.....

From: (b)(6) SCGUS]
Sent: 7 May 2019 11:12:58 +0000
To: Scher, Deborah L.
Subject: [EXTERNAL] Re: Dr. Manji

Deborah

I am so glad he is helping you. He is one of the best when it comes to understanding how to make a dent with Suicide Prevention.

I can't remember if I connected you and (b)(6) to have a more casual conversation. I had to send my computer in for an upgrade and have been working off my iPad since Thursday. Do you still want me to do that for you?

Sent from my iPhone

(b)(6)
Johnson & Johnson Healthcare Systems
Field Director Federal Team/ Strategic Engagement
(b)(6)
(b)(6)@its.jnj.com

> On May 7, 2019, at 6:31 AM, Scher, Deborah L. <Deborah.Scher@va.gov> wrote:
>
> Good morning (b)(6)
>
> Thank you again for all the time and effort you spent connecting the two of us. He has been a pleasure to get to know and has become my new penpal! We were emailing back and forth all during the weekend, discussing the position and reviewing candidates. He has been a tremendous source of referrals.
>
> So appreciate your partnership on this. Look forward to speaking soon.
>
> Have a great day,
>
>
> Deborah
> Deborah Lafer Scher
> Executive Advisor to the Secretary
> Secretary's Center for Strategic Partnerships
> US Department of Veterans Affairs
>

From: Scher, Deborah L.
Sent: 7 May 2019 23:05:24 +0000
To: (b)(6) [SCGUS]
Subject: RE: [EXTERNAL] RE: New Office Factsheet

Fabulous! Such a small world. So glad she could be helpful. You will enjoy getting to know each other at our next stakeholders meeting. So glad I could connect you with someone to help move this important work forward.

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
US Department of Veterans Affairs

From: (b)(6) [SCGUS] (b)(6) @its.jnj.com>
Date: Tuesday, May 07, 2019, 4:46 PM
To: Scher, Deborah L. <Deborah.Scher@va.gov>
Subject: [EXTERNAL] RE: New Office Factsheet

Sounds like a great plan.
I just got off the phone with (b)(6) from Psych Armor and I cannot believe it but she lives in my hometown in NY.
Her kids went to the same High School I did.
What a small world.

We talked for 40 minutes and I think there is a possible avenue to go down around education to the VA around Spravato.

Will be reaching out to my brand team to give them some highlights.
But in the meantime, Tina is going to find out who the J&J contact was that (b)(6) had prior to her moving over to Psych Hub.

Love it when I can uncover new opportunities.
Thank you so much for the introduction.

(b)(6)
Field Director Federal Team/ Strategic Engagement
Strategic Customer Group

Johnson & Johnson HEALTH CARE SYSTEMS INC.

Mobile: (b)(6)
Fax: 866.485.2348
E-Mail: (b)(6) @its.jnj.com

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From: Scher, Deborah L. <Deborah.Scher@va.gov>
Sent: Tuesday, May 07, 2019 4:26 PM
To: (b)(6) [SCGUS] (b)(6) @its.jnj.com>
Subject: [EXTERNAL] RE: New Office Factsheet

Dear (b)(6)

Thank you for making the time to review this and to share your feedback. It means so much to me!

We plan to post this on our website which should be launched very soon.

Yes, would be delighted if you might share this with your Corporate Equity team. I would welcome their feedback as well.

With appreciation,

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
US Department of Veterans Affairs
[Follow us on Twitter](#)

From: (b)(6) [SCGUS] (b)(6) @its.jnj.com>
Sent: Tuesday, May 7, 2019 3:49 PM
To: Scher, Deborah L. <Deborah.Scher@va.gov>
Subject: [EXTERNAL] RE: New Office Factsheet

Deborah

This is excellent and so much clearer than the last version you sent me.

How do you plan distributing this to the masses?

Will you post this on Twitter/ LinkedIn as a way to drive people to your site?

Will you send out via personal emails?

.

When can I send this along to our Corporate Equity team? I will be curious to see how they will react to it?

It certainly gets your juices flowing with ideas.

WELL DONE!!

(b)(6)

Field Director Federal Team/ Strategic Engagement
Strategic Customer Group

Johnson & Johnson HEALTH CARE SYSTEMS INC.

Mobile: (b)(6)
Fax: 866.485.2348
E-Mail: (b)(6)@its.jnj.com

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From: Scher, Deborah L. <Deborah.Scher@va.gov>
Sent: Tuesday, May 07, 2019 2:44 PM
To: (b)(6) [SCGUS] (b)(6)@its.jnj.com>
Subject: [EXTERNAL] New Office Factsheet

Dear (b)(6)

Some time ago, you were kind enough to review our website materials in draft and rightly pointed out we needed more information on how to partner. We've recently created the fact sheet attached and wondered if we might impose on you again to provide feedback.

Thank you in advance,
Deborah

From: (b)(6)
Sent: 10 May 2019 18:05:48 +0000
Subject: [EXTERNAL] Final Agenda and Details - VA Healthcare
Attachments: Speaker Final Agenda - VA Healthcare.pdf, FINAL - Venue Map.pdf

To our distinguished Speakers,

(If you are the point of contact for one of our VA Healthcare speakers, please ensure they also received this email).

We are only three days away from the **VA Healthcare 2019 summit**. I hope you are eager as we are for the event to arrive, as we look forward to seeing you in National Harbor, Maryland in a few days!

Ahead of the event we wanted to ensure that you received the final agenda (**attached**) and additional onsite details. Please note any revisions to this agenda will be posted on our website and you will be notified immediately by Zia, as well as during the Chairperson announcements, throughout the conference.

Onsite Logistics

1 – (b)(6) will be your onsite contact. Please text or call (b)(6) for any on-site questions you may have. You can also email (b)(6) with any issues or last minute needs at (b)(6)@iqpc.com

2 – **Please be present in the conference area at least 60 – 75 minutes** before your session begins; identify yourself as a speaker at the event registration desk.

3 – For all general session and track speakers (please disregard if you are on a panel or hosting an IDG) – Please **bring a back up copy** of your PPT/presentation file and any videos on a thumb drive. If you did not submit your presentation in advance, please arrive at least 75 minutes prior to your speaking session and provide Zia with your presentation immediately upon arrival. **Presentations not received within 75 minutes of the speaking session will not be accessible for your session.**

Conference Venue

1 – The Main Conference (May 13 & May 14) General Session & Track A room will be held in the **Woodrow Wilson Ballroom A** the Track B room will be held in **Baltimore Meeting Room 3, 4, 5**, both located on the 1st floor of the hotel. The Interactive Discussion Groups are located throughout Woodrow Wilson Ballroom A and Baltimore Meeting Rooms 3, 4, 5. There will be plenty of signage to find the event.

2 - The Post-Conference Focus Day (May 15th) will be held in the Baltimore Meeting Room 3, 4, 5 of the hotel.

3 – For all General Session and Track Sessions (please disregard if you are on a panel or hosting an IDG) , an event chairperson will introduce you with highlights from your bio at the beginning of your talk, and show **time cards** near the end. A/V set up will consist of a PC with your presentation pre-loaded (if applicable), a **wireless microphone** (so you may move around while presenting) and a podium for any notes.

For all general session and track speakers (please disregard if you are on a panel or hosting an IDG) – If you did not submit your presentation in advance, your presentation will not be pre-loaded and you will need to arrive at least 75 minutes prior to your speaking session and provide Zia with your presentation immediately upon arrival. **Presentations not received within 75 minutes of the speaking session will not be accessible for your session.**

4 – The speaking time in the most recent agenda (attached) includes any time you'd like to leave for **Q&A** – there will be a roving microphone in the audience.

Before You Travel:

1 – **The event dress code is business casual; speakers often prefer business formal** but this is entirely at your discretion.

2 – WiFi will be available in the meeting area for any last minute updates that you need to do.

3 – We look forward to seeing you at the Monday evening cocktail reception if you are able to attend. The reception will be located in the Exhibit Hall (Woodrow Wilson Ballroom B, C, D).

4 – Remember to bring plenty of **business cards**.

Please let me know of any questions or concerns – we look forward to seeing you there!

Kind regards,

(b)(6)

Senior Event Coordinator – IQPC New York
1410 N. Westshore Blvd., Suite 510, Tampa, FL 33607
535 5th Avenue, 8th floor, New York, New York 10017
T: (b)(6)@iqpc.com



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Monday, May 13, 2019 | Main Summit Day 1

8:00 AM	Breakfast and Conference Registration	
8:45 AM	Opening Remarks Peter Shelby, Conference Chairman, VA Healthcare 2019 Bob Carey, Conference Co-Chairman, The Independence Fund	
9:00 AM	The Future of the VA and How To Build Strategic Partnerships Around Our 5 Top Priorities Deborah Lafer Scher, Executive Advisor to the VA Secretary, Secretary's Center for Strategic Partnerships, U.S. Department of Veterans Affairs	
10:00 AM	Connecting Research to External Hospitals Chris Doran, Strategic Growth, Rauland-Borg	
10:30 AM	Morning Break and Demo Drive Begins Brief remarks by Alan Macht, Director of Sales and Marketing, Action Manufacturing Inc.	
	TRACK A	TRACK B
11:15 AM	Modernizing VA Hospitals and Facilities: Delivering Better Veteran Experiences Jeffrey Saura, Chief Technology Officer, Orlando VA Medical Center (OVAMC)	Paying the Light Bill: Practical Considerations for Building Brand Loyalty Richard Griffith, Chief Strategy Officer, Veterans Health Indiana, U.S. Department of Veterans Affairs
12:15 PM	The Use of NIV as the Standard of Care in Treating COPD & Chronic Hypercapnic Respiratory Failure William D. Frazier, MD, CMO, Viamed	B-Resource Management: Real Time Information Sharing To Support Real Time Needs Tina Joros, JD, VP and General Manager, Open Business Unit and Financial Platforms, Allscripts
1:15 PM	Networking Lunch	
	Interactive Discussion Groups (IDGs)	
2:15 PM	IDG 1: Access & Use: Pre- and Post-Acute Stroke Care Dr. Huanguang Jia, Research Health Scientist, VA Center of Innovation on Disability and Rehabilitation Research Dr. Diane Cowper Ripley, Research Health Scientist, VA Center of Innovation on Disability & Rehab Research	IDG 3: Mobile Diagnostic Imaging: Maximizing Efficiency for Radiology Steve Richter, SVP & General Manager, Insight Imaging Mobile Solutions
	IDG 2: Solving The Medical Device & IOT Security Challenges Tyson Hempel, Executive Vice President of Global Sales, Medigale	IDG 4: The Role of Pro Resolving Mediators for Chronic Pain and TBI in the Veteran Population Dr. Robert Martindale, MD, Professor Surgery, Chief of Gastrointestinal and General Surgery & Medical Director Hospital Nutritional Service, Oregon Health Sciences University
2:45 PM	IDG 1: Transition Pain Service: A Novel Approach to Perioperative Pain Management Dr. Kimberlee Bayless, DNP, Nurse Practitioner & Director the Transitional Pain Service, George E. Wahlen Department of Veterans Affairs Medical Center Benjamin Brooke, MD, PhD, FACS, Chief Division of Vascular Surgery, University of Utah Michael J. Buys, MD, Anesthesiologist and Assistant Clinical Professor, University of Utah Amy Beckstead, RN, MSN, Nurse Educator & Manager, VA Regional Centers of Innovation Specialty Care	IDG 3: A Tool in the Toolbox: Implementing VA Video Connect to Increase Access to Mental Health Treatment Jan Lindsay, PhD, Director, Telebehavioral Health, Michael E. DeBakey VA Medical Center
	IDG 2: An Overview of Opioid Use Disorder (OUD) and New Treatments Moderator: Dr. Anne Andorn, MD, CMO, Indivior Panelists: Dr. Ismene Petrakis, Chief of Psychiatry and Mental Health Service Line, VA CT Healthcare System Barbara Haight, Pharm.D, Medical Affairs, Indivior	IDG 4: Health and Independent Living (HAIL) for Rural Veterans With Disabilities Dr. Diane Cowper Ripley, Research Health Scientist, VA Center of Innovation on Disability & Rehabilitation Research Dr. Huanguang Jia, Research Health Scientist, VA Center of Innovation on Disability and Rehabilitation Research
3:45 PM	Afternoon Break and 22 Pushup Challenge	
4:15 PM	Keynote: VA Modernization Priorities to Improve Healthcare Access and Quality Surafel Asgedom, Chief Modernization Officer, US Department of Veterans Affairs	
5:00 PM	Closing Remarks Peter Shelby, Conference Chairman, VA Healthcare 2019 Bob Carey, Conference Co-Chairman, The Independence Fund	
5:10 PM	Evening Reception & Networking	

Tuesday, May 14, 2019 | Main Summit Day 2

8:00 AM **Breakfast and Conference Registration**

8:45 AM **Opening Remarks**

Peter Shelby, Conference Chairman, **VA Healthcare 2019**

Bob Carey, Conference Co-Chair, **The Independence Fund**

9:00 AM **VBA's Top Priorities To Go Further For Veterans**

Margarita Devlin, Principal Deputy Under Secretary for Benefits, **US Department of Veterans Affairs**

10:00 AM **Advances In The Management of CAD/PAD: A New Treatment for Thrombotic Risk Reduction**

Dr. Joshua Yamamoto, Cardiologist, **Georgetown University Hospital**

10:45 AM **Morning Break and Hero Dog Demonstration**

	TRACK A	TRACK B
11:30 AM	Effects of New Rule Changes, Value Based Care and Bundled Payments, On Providers As Well As Payers Dr. Don Kosiak, Senior Vice President & Chief Medical Officer, Leidos	Big Innovation at the VA Joel Mewton, Medical Director, Bitscopic
12:15 PM	Short, Medium and Long Term Acquisition Priorities For the VA Technology Acquisition Center Frank Coluccio, Program Manager, Technology Acquisition Center, Department of Veterans Affairs	Healthcare: Connected Care and AI In Medical Devices William Cerniuk, Program Director, VA Mobile Health & VHA Technology Director, U.S. Department of Veterans Affairs

12:45 PM **Networking Lunch and Demo Drive Prize Drawing**

1:45 PM **LTG (R) Mark Hertling**, Author, Speaker & Contributor, **Physician Leadership Development**

2:45 PM **Afternoon Break and Book Signing by LTG (R) Mark Hertling**

3:15 PM **Advance Outpatient Care For Addiction Management**

Dr. Aldo Morales, Psychiatrist & Medical Director, **Retreat Behavioral Health**

3:45 PM **PANEL DISCUSSION: Challenges & Opportunities For Veterans Affairs Departments Around the Country**

Vito Imbasciani PhD MD, Secretary, California **Department of Veterans Affairs**

COL (R) Wanda Wright, Director of Veteran Services, **Arizona State Government**

Alfie Alvarado-Ramos, Director, **Washington State Department of Veterans Affairs**

Kelley Kash, CEO, **Maine Veterans Homes**

4:45 PM **Chairperson's Closing Remarks**

Peter Shelby, Conference Chairman, **VA Healthcare 2019**

5:00 PM **End of Main Day 2**

Wednesday, May 15, 2019 | Post-Conference Focus Day

8:00 AM Breakfast and Conference Registration

8:50 AM Chairperson's Opening Remarks

9:00 AM **KEYNOTE: Modernizing The Largest Health Care Delivery System In America**
Joseph Ronzio, Deputy Chief Health Technology Officer, **U.S. Department of Veterans Affairs**

10:00 AM **Improving Veterans Experience**
Dr. Lynda Davis, Chief Veterans Experience Officer, **U.S. Department of Veterans Affairs**

11:00 AM Morning Networking and Refreshment Break

	TRACK A	TRACK B
11:30 AM	Extract Meaningful Insights From Unstructured Data: Practical Usage of AI/ML for Data Classification and Information Extraction From Unstructured Electronic Healthcare Records Jerry Zhou, Founder, Chief Innovation Officer and Artificial Intelligence and Machine Learning Evangelist, Futrend Technology	Spravato™: The First NMDA Receptor Antagonist Approved, In Conjunction with an Oral Antidepressant, For Adults with Treatment-Resistant Depression Dr. Moraima Trujillo, Psychiatrist, Miami Veterans Affairs Healthcare System

12:30 PM **Networking Lunch**
Lunch & Learn: Arturo Martinez, Medical Director, **Molecular Biologicals**

1:30 PM	The Veterans Affairs Homeless Program Office's Approach to Ending Homelessness Monica Diaz, Executive Director, VHA Homeless Programs Office	Improving Minority Veterans Access To VA Benefits & Services Col (R) Dennis O. May, Deputy Director, Center for Minority Veterans, US Department of Veterans Affairs
---------	---	---

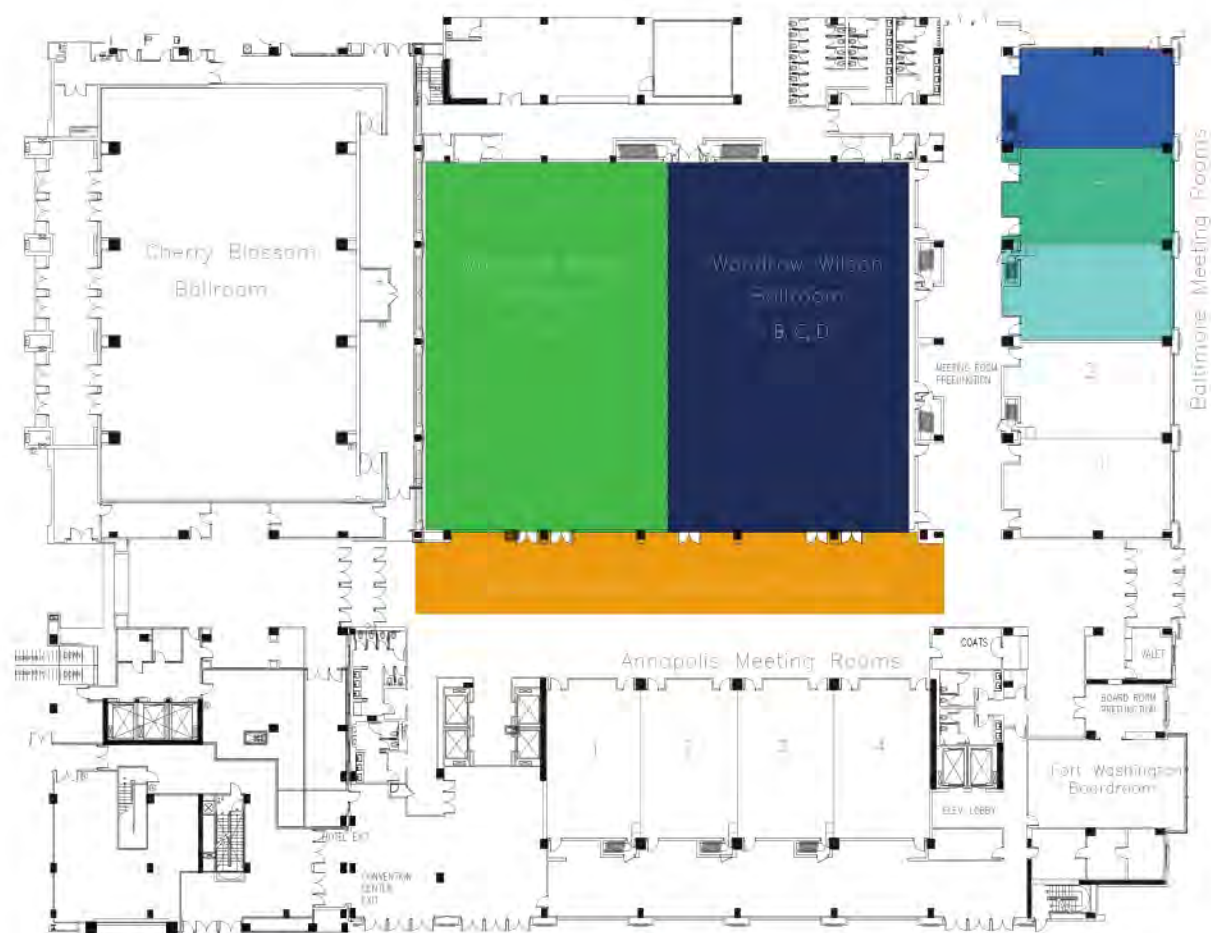
2:30 PM Afternoon Networking and Refreshment Break

3:00 PM	Improving Community Care to Provide Quality and Timely Healthcare to Veterans Jody Searight, Chief Care In The Community, Department of Veterans Affairs	Improving Women's Access to Vital Health Benefits Cherissa Jackson, Chief Medical Executive, AMVETS Sherman Gillums, National Chief Strategy/Advocacy Officer, AMVETS
---------	---	--

4:00 PM End of Workshop Day

Thank you for attending!

SEE YOU NEXT YEAR!



Monday, May 13th | Main Summit Day One

Main Summit Day One Registration
General Session
Exhibit Hall & Networking Breaks
Veteran Appreciation Lounge
Track A
Track B
Networking Lunch
Interactive Discussion Group 1
Interactive Discussion Group 2
Interactive Discussion Group 3
Interactive Discussion Group 4
Evening Reception

Woodrow Wilson Ballroom Prefunction
Woodrow Wilson Ballroom A
Woodrow Wilson Ballroom B, C, D
Woodrow Wilson Ballroom B, C, D
Woodrow Wilson Ballroom A
Baltimore Meeting Room 3, 4, 5
Woodrow Wilson Ballroom B, C, D
Baltimore Meeting Room 4
Baltimore Meeting Room 5
Baltimore Meeting Room 3
Woodrow Wilson Ballroom A
Woodrow Wilson Ballroom B, C, D

Tuesday, May 14th | Main Summit Day Two

Main Summit Day Two Registration
General Session
Exhibit Hall & Networking Breaks
Veteran Appreciation Lounge
Track A
Track B
Networking Lunch

Woodrow Wilson Ballroom Prefunction
Woodrow Wilson Ballroom A
Woodrow Wilson Ballroom B, C, D
Woodrow Wilson Ballroom B, C, D
Woodrow Wilson Ballroom A
Baltimore Meeting Room 3, 4, 5
Woodrow Wilson Ballroom B, C, D

Wednesday, May 15th | Post-Conference Focus Day

Focus Day Registration
Track A
Track B
Networking Breaks & Networking Lunch

Woodrow Wilson Ballroom Prefunction
Baltimore Meeting Room 5
Baltimore Meeting Room 4
Baltimore Meeting Room 3

From: (b)(6) [SCGUS]
Sent: 14 May 2019 16:22:47 +0000
To: Scher, Deborah L.
Subject: [EXTERNAL] (b)(6) info
Attachments: FY2018_Q1_VA_Veteran_Suicide_Prevention.pdf

Deborah

I wanted to send you this slide deck around the Suicide Prevention modeling we spoke to last night. This would fall under the Healthy Heroes Precision Medicine workstream.

Looks like on slide 17 you can see that (b)(6) is the Data person from the VA.

Hope this helps frame out the work that is done from the VA prospective.

(b)(6)

Field Director Federal Team/ Strategic Engagement
Strategic Customer Group

Johnson & Johnson HEALTH CARE SYSTEMS INC.

Mobile: (b)(6)
Fax: 866.485.2348
E-Mail: (b)(6) @its.jnj.com

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Veteran Suicide Prevention

Goal Leads: Dr. Keita Franklin, Acting Director, Suicide Prevention and Dr. David Carroll, Executive Director, Office of Mental Health and Suicide Prevention

Veterans Benefits and Services

Overview

Goal Statement

- The Veterans Health Administration (VHA) will proactively identify and provide interventions for at-risk Veterans, both those using VHA care and those using other care systems, to prevent suicide and overdose death. VHA will increase the use of interventions for Veterans at-risk for suicide through the use of predictive modeling and enhanced engagement strategies. By September 30, 2019, the percent of Veterans targeted through predictive modeling algorithms within the VHA system that receive core recommended interventions will increase to 90% from the baseline of 57%. By September 30, 2019, VA has partnered with Health and Human Services(HHS)/Substance Abuse and Mental Health Services Administration (SAMHSA) and 17 cities in a “Mayor’s Challenge” to develop community plans to end Veteran suicide outside the VHA system.

Overview

Challenge

- While interventions to reduce the likelihood of suicide and overdose have been developed, they do no good unless they reach the people who need them at the right time.

Opportunity

- VA is using advanced analytics combined with clinical interventions to identify people most likely in need of preventive intervention and connect them with services.
 - Within VA, we mine electronic medical record data to identify patients at greatest risk of overdose or suicide events or death. Computer systems are used to provide lists of patients estimated to be at high risk paired with key information about the patient's clinical case and suggestions for interventions to address risks. Clinicians and care coordinators use these computer systems to target clinical interventions and outreach to those with high estimated risk.
 - To help Veterans not enrolled in VA care, we are examining data to identify the Veteran populations at greatest risk and the organizations with which they engage. Partnering with Health and Human Services/SAMHSA and 17 cities through the Mayor's Challenge, VA is working collaboratively based on data to develop community action plans to end Veteran suicide.

Goal Structure & Strategies (1 of 4)

Goal Structure for Targeting Patients Receiving VA Health Care:

- Within VA, efforts to target interventions to high risk patients focus on use of two predictive models: (1) Recovery Engagement and Coordination for Health – Veterans Enhanced Treatment (REACH VET), which identifies patients at statistical risk of death by suicide in the next month; and (2) The Stratification Tool for Opioid Risk Mitigation (STORM), which identifies patients at statistical risk of overdose or suicide-related health care events or death in the next year.
- Patients identified as within the top risk tier at their facility based on the REACH VET model are expected to receive a care review and outreach intervention from a personally assigned care provider.
- Patients receiving opioid prescriptions who are identified as very high risk based on the STORM model are expected to receive guideline recommended risk mitigation interventions, including written informed consent, Prescription Drug Monitoring Program checks, and urine drug screening.

Strategies for Targeting Patients Receiving VA Health Care:

- Improve clinical implementation of core recommended interventions for patients predicted to be at high risk of suicide or overdose
- Improve predictive models to more reliably and accurately identify Veterans at risk
- Enhance data systems to enable more complex data mining and analysis and higher performance clinical decision support systems
- Expand clinical capacity for provision of risk intervention through the Mental Health Hiring Initiative and restructuring of care practices.

Goal Structure & Strategies (3 of 4)

Goal Structure for Targeting Veterans Not Receiving VA Health Care:

- Veteran suicide is an important public health issue impacting Veterans and communities nationally. Of Veterans who die by suicide, 70% are not recently engaged in VHA health care. Ending Veteran suicide will take coordinated, bundled, up stream approaches that fit the unique needs and opportunities within communities and are beyond the scope of VA alone.
- SAMHSA is uniquely positioned and empowered to work directly with states and communities to address suicide. We have partnered with SAMHSA to host a Mayor's Challenge aimed at developing local action plans focused on ending Veteran suicide.

Strategies for Targeting Veterans Not Receiving VA Health Care:

- As part of the Mayor's Challenge, we will develop community strategic action plans that can be implemented at the local level to end Veteran suicide.
- Integrate Veteran suicide prevention into the values, culture, leadership, and work of a broad range of organizations and programs with a role in supporting suicide prevention activities.
- Establish effective, sustainable, and collaborative suicide prevention programs for Veterans at the national, state/territorial, tribal, and local levels.
- Pursue and sustain public-private partnerships to advance Veterans suicide prevention.
- Develop, implement, and evaluate communication efforts designed to reach Veterans.

Key Milestones (1 of 5)

- Improve clinical implementation of core recommended interventions for Veterans predicted to be at high risk of suicide or overdose
- FY18Q1 Status: Developed and finalized the APG's goal statement and action plan.

Milestone Summary					
Key Milestones	Milestone Due Date	Milestone Status	Change from Last Quarter	Owner	Anticipated Barriers or Other Issues Related to Milestone Completion
Provide guidance and tools on models of care delivery using predictive model-based targeting of at risk patients	March, 2018 and on-going			OMHSP	None at this time.
Provide technical assistance and clinical facilitation to VA health care systems to improve implementation of practices	March, 2018 and on-going			OMHSP	Competing priorities for technical assistance staff may limit available resources
Develop and disseminate provider educational materials and programs on recommended interventions	April, 2018 and on-going			OMHSP	Large volume of new initiatives may limit both education resource development and provider bandwidth
Provide implementation monitoring tools to help facilities track and trouble-shoot practice implementation	June, 2018 and on-going			OMHSP	None at this time.

Key Milestones (2 of 5)

- Improve predictive models to more reliably and accurately identify Veterans at risk
- FY18Q1 Status: Developed and finalized the APG's goal statement and action plan.

Milestone Summary					
Key Milestones	Milestone Due Date	Milestone Status	Change from Last Quarter	Owner	Anticipated Barriers or Other Issues Related to Milestone Completion
Update REACH VET model on more recent outcome data	June, 2018			OMHSP	None at this time.
Update STORM model on more recent outcome data	June, 2018			OMHSP	None at this time.
Define and calculate new candidate predictors for REACH VET and STORM models	Sept, 2018			OMHSP	Complexity of work makes unanticipated delays more likely. No current delays at this time.
Recode REACH VET and STORM decision-support systems to utilize updated models	Dec, 2018			OMHSP	Limited personnel with necessary skills may impact availability to complete coding

Key Milestones (3 of 5)

- Enhance data systems to enable more complex data mining and analysis and higher performance clinical decision support systems
- FY18Q1 Status: Developed and finalized the APG's goal statement and action plan.

Milestone Summary					
Key Milestones	Milestone Due Date	Milestone Status	Change from Last Quarter	Owner	Anticipated Barriers or Other Issues Related to Milestone Completion
Develop a cloud-based development and reporting platform for VA decision-support systems	March, 2018			OIT	None at this time.
Migrate REACH VET and STORM to the cloud-based platform	June 30, 2018			OMHSP	Architecture options still being defined. May impact timeline
Develop a platform for data analysis and decision support processing on the Dept of Energy supercomputer	Sept 2018			OMHSP	Technically complex multi-agency effort may create additional barriers to overcome
Incorporate newly derived data elements from the supercomputer environment into VA suicide prevention decision support systems	March 2019			OMHSP	Technically complex multi-agency effort may create additional barriers to overcome

Key Milestones (4 of 5)

- Expand clinical capacity for provision of risk intervention through the MH Hiring Initiative and restructuring of care practices.
- FY18Q1 Status: Developed and finalized the APG's goal statement and action plan.

Milestone Summary					
Key Milestones	Milestone Due Date	Milestone Status	Change from Last Quarter	Owner	Anticipated Barriers or Other Issues Related to Milestone Completion
Provide strategic planning support for facilities to guide mental health and suicide prevention team staffing plans	Feb, 2018	Complete		OMHSP	None at this time.
Provide technical assistance to facilities with recruitment and retention challenges	Feb, 2018 and on-going			OMHSP	Competing priorities for technical assistance staff may limit available resources
Monitor progress towards net gain of 1000 MH Full Time Equivalent (FTE), with focus, on SPT, PCMH, and outpatient clinical FTE	Feb, 2018 and on-going			OMHSP	None at this time.

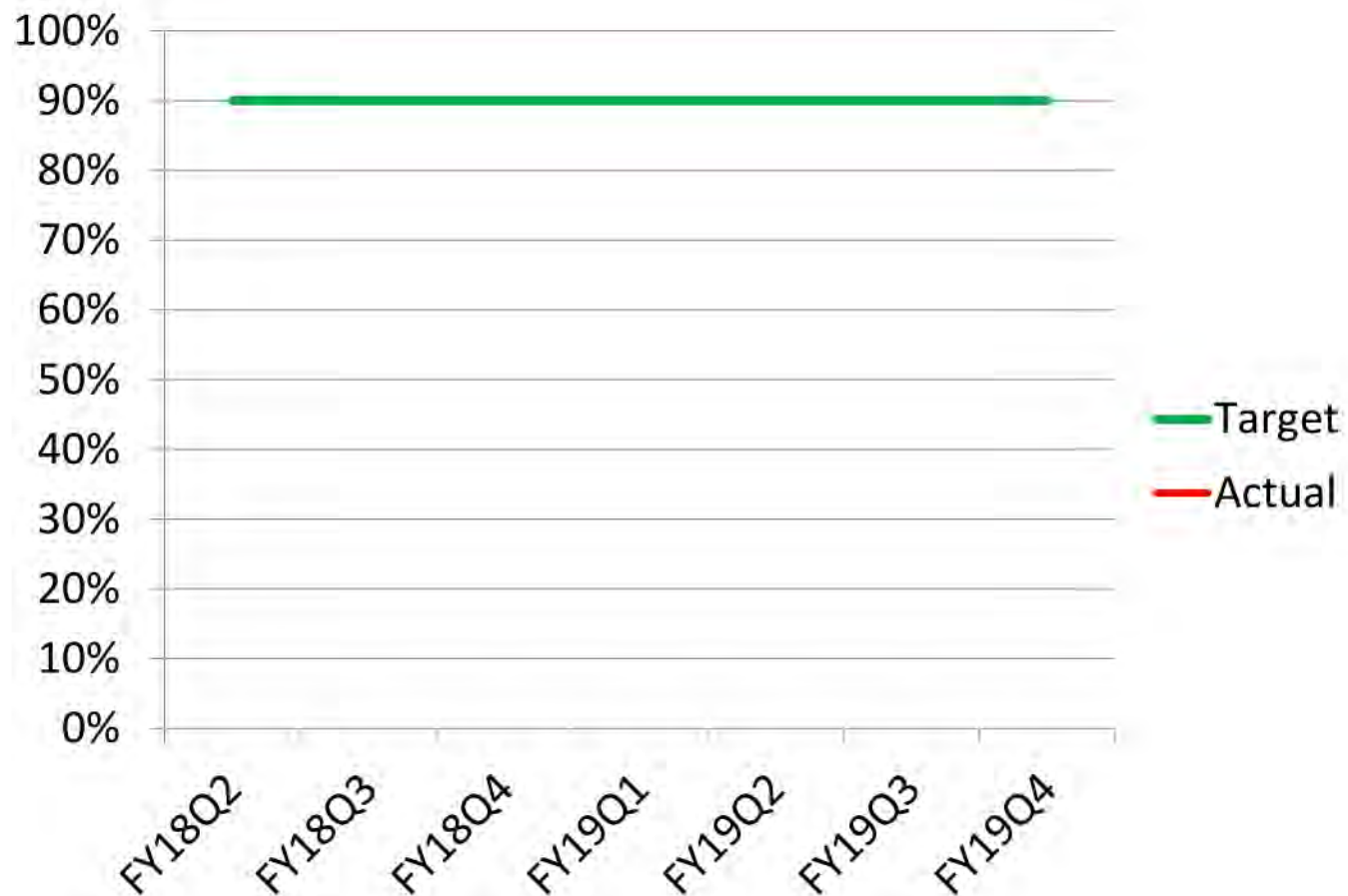
Key Milestones (5 of 5)

- As part of the Mayor's Challenge develop community strategic action plans that can be implemented at the local level to end Veteran suicide for all Veterans.
- FY18Q1 Status: Developed and finalized the APG's goal statement and action plan.

Milestone Summary					
Key Milestones	Milestone Due Date	Milestone Status	Change from Last Quarter	Owner	Anticipated Barriers or Other Issues Related to Milestone Completion
Select initial 7 cities	January 2018	Complete		OMHSP	None at this time.
Conduct Policy Academy for city teams	March 2018			OMHSP	None at this time.
Develop community specific plans to end suicide	March 18-June 18			OMHSP	Tight timeline and competition for resources will make it challenging to deliver on time
Implement plans and submit follow up reports	May 18-August 18			OMHSP	Tight timeline and competition for resources will make it challenging to deliver on time
Launch second wave of cities in the Challenge	June 18			OMHSP	Increased interest after initial round may create a significantly larger candidate pool that requires additional screening
Complete second wave of cities	February 19			OMHSP	Delayed start may impact completion

Key Indicators

Percent of Veterans targeted through predictive modeling algorithms within the VHA system that receive core recommended interventions



Key Indicators

of cities partnering as part of the Mayor's Challenge to develop community plans to end Veteran suicide outside the VHA system



Data Accuracy and Reliability (1 of 2)

Data on whether targeted patient populations receive recommended interventions are based on data elements within the VA Corporate Data Warehouse (CDW). Data from CDW is extracted nightly from the VA's Electronic Health Record (EHR), and includes information entered by clinicians regarding the care delivered to Veterans during health care encounters. This includes prescriptions written, procedures conducted and diagnoses treated. VA has on-going data quality validations underway to ensure proper data transmission and accuracy of the data tables.

However, data is limited by accuracy and completeness of clinical coding; if clinicians make errors in documenting care in the medical record (e.g. picking an incorrect diagnostic code or procedure code in their data entry), the database will reflect those errors. Likewise, some interventions are supposed to be documented in the EHR using specific structured notes or documentation templates.

If care is delivered but documented using generic clinical notes, these interventions may not be identified in the data warehouse. VHA employs clinical coding experts that work with clinical staff to improve clinical coding, and provides trainings to encourage use of standardized documentation practices to mitigate these data limitations.

Data Accuracy and Reliability (2 of 2)

High risk patients are identified using predictive models developed on VA data. Information on the validation and limitations of these models have been published:

Kessler, R.C., Hwang, I., Hoffmire, C.A., McCarthy, J.F., Petukhova, M.V., Rosellini, A.J., Sampson, N.A., Schneider, A.L., Bradley, P.A., Katz, I.R., Thompson, C., & Bossarte, R.M. (2017, September). Developing a practical suicide risk prediction model for targeting high-risk patients in the Veterans Health Administration. *International Journal of Methods in Psychiatric Research*, 26(3). doi: 10.1002/mpr.1575.

McCarthy, J.F., Bossarte, R.M., Katz, I.R., Thompson, C., Kemp, J., Hannemann, C.M., Nielson, C., & Schoenbaum, M. (2015, September). Predictive modeling and concentration of the risk of suicide: Implications for preventive interventions in the US Department of Veterans Affairs. *American Journal of Public Health*, 105(9), 1935-1942. doi: 10.2105/ajph.2015.302737.

Oliva, E.M., Bowe, T., Tavakoli, S., Martins, S., Lewis, E.T., Paik, M., Wiechers, I., Henderson, P., Harvey, M., Avoundjian, T., Medhanie, A., & Trafton, J.A. (2017, February). Development and applications of the Veterans Health Administration's Stratification Tool for Opioid Risk Mitigation (STORM) to improve opioid safety and prevent overdose and suicide. *Psychological Services*, 14(1), 34-49. doi: 10.1037/ser0000099.

Leadership

Oversight and Program Management

Dr. David Carroll, Executive Director, Office of Mental Health and Suicide Prevention (OMHSP)

Dr. Keita Franklin, Acting Director for Suicide Prevention, OMHSP

Internal Milestones Lead

Dr. (b)(6) OMHSP

Data Lead

Dr. (b)(6) OMHSP

External Milestones Lead

(b)(6) OMHSP

Additional Information

Contributing Programs

Organizations:

- Cities participating in the Mayor's Challenge

Regulations:

- Comprehensive Addiction and Recovery Act of 2016

Policies:

- VHA Directive 1306, Querying State Prescription Drug Monitoring Programs
- VHA Directive 1005, Informed Consent for Long-term Opioid therapy for Pain
- VHA Handbook 1160, Uniform Mental Health Services

Other Federal Activities:

- Health and Human Services/SAMHSA
- Department of Defense
- Department of Energy
- Department of Homeland Security

Additional Information

Stakeholder / Congressional Consultations

- Congressional consultations
- The Veteran
- Veteran Service Organizations
- Community Partners

From: Scher, Deborah L.
Sent: 16 May 2019 02:17:00 +0000
To: (b)(6) (VHACO)
Subject: RE: [EXTERNAL] FW: Contact suggestions for Spravato access.

Terrific. I will come to you at 10. See you then.

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
U.S. Department of Veterans Affairs

From: (b)(6) (VHACO) (b)(6) @va.gov>
Date: Wednesday, May 15, 2019, 10:06 PM
To: Scher, Deborah L. <Deborah.Scher@va.gov>
Subject: RE: [EXTERNAL] FW: Contact suggestions for Spravato access.

Hi- why don't we meet tomorrow in my office at 10 or 10:30 tomorrow? I am in 820-
will that work?

Sent with BlackBerry Work
(www.blackberry.com)

From: Scher, Deborah L. <Deborah.Scher@va.gov>
Date: Wednesday, May 15, 2019, 10:01 PM
To: (b)(6) (VHACO) (b)(6) @va.gov>
Subject: RE: [EXTERNAL] FW: Contact suggestions for Spravato access.

Hi (b)(6)
I see we have a call in line set. Lets meet in person. Please let me know where you sit and
I will come to you.

Thank you,

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
U.S. Department of Veterans Affairs

From: (b)(6) (VHACO) (b)(6) @va.gov>
Date: Wednesday, May 15, 2019, 11:14 AM

To: Scher, Deborah L. <Deborah.Scher@va.gov>
Cc: (b)(6)@va.gov
Subject: RE: [EXTERNAL] FW: Contact suggestions for Spravato access.

Hi Deborah – great to see you and was glad to be a part of the briefing! Would you be available to meet or for a call Thursday to go over next steps?

Thanks (b)(6)

(b)(6)
Executive Assistant to the Principal Deputy Under Secretary for Health (10A)
Veterans Health Administration
Phone: (b)(6)
Mobile: (b)(6)
Fax: 202-273-7090

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From: Scher, Deborah L.
Sent: Tuesday, May 14, 2019 10:40 PM
To: (b)(6) VHACO (b)(6)@va.gov
Subject: FW: [EXTERNAL] FW: Contact suggestions for Spravato access.

Hi (b)(6)
So nice to see you today. Let's discuss next next steps given the people and timetable outlined in (b)(6) note below.

Thank you. Hope the hearing goes well tomorrow,
Deborah

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
U.S. Department of Veterans Affairs

From: (b)(6) [SCGUS] (b)(6)@its.jnj.com
Date: Tuesday, May 14, 2019, 10:31 PM
To: Scher, Deborah L. <Deborah.Scher@va.gov>
Subject: [EXTERNAL] FW: Contact suggestions for Spravato access.

A couple of thoughts regarding your ask around timeline.

Here are a couple of dates we need to have in the back of our head.

If we want a patient treated by June, you are going to need to:

1. Touch base with both Dr. (b)(6) and (b)(6) to see what needs to be done on their end to make that happen. (This will give (b)(6) a heads up for next week since the P&T meeting is going to be on May 21st.) This might make her uncomfortable but please reinforce that Dr. Stone asked for an update and this is the goal he has set out for all of us.
2. There might need to be something expedited with Dr. (b)(6) end. She is in charge of providing the national guidance since this is informing her phase 1 sites (Ketamine IV Sites) how she wants the drug to be delivered and monitored. I don't believe this was supposed to be presented till the June P&T (if it follows the same cadence of the May meeting, I am thinking this should happen around June 18th). Again delivering the same message above regarding Dr. Stone's goals, this might uncover other barriers I don't know about. This is past the 90 day timeline that Dr. Stone spoke to today. (Drug was available on March 17th, 90 days later is June 17th.)
3. Getting the list of 12 Ketamine sites should not be a problem, unless she tells you that she needs clearance to share that list with us. Might be something you can on your end to help expedite that so we can start to deploy our people in those sites and start to do the education needed to ensure a proper set up.

Does this help? If you need more detail I will be available tomorrow am. Just call me.

Hope you had a great rest of the day.

(b)(6)

Field Director Federal Team/ Strategic Engagement
Strategic Customer Group

Johnson & Johnson HEALTH CARE SYSTEMS INC.

Mobile: (b)(6)
Fax: 866.485.2348
E-Mail: (b)(6)@its.jnj.com

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From: (b)(6) [SCGUS]
Sent: Tuesday, May 14, 2019 4:12 PM
To: Scher, Deborah L. <Deborah.Scher@va.gov>
Subject: Contact suggestions for Spravato access.

Deborah

Thank you for continuing to help us with this important initiative.

The only people I could suggest to connect with are the 2 main people we are working with via your recommendations.

Isle Wiechers MD-Developing the National Guidance and putting together the phased approach.

(b)(6) Head of PBM P&T.

Another person which you spoke to today is (b)(6) MD. We have a great relationship with her, but was not sure how to use her appropriately. So if you have ideas I would be happy to connect with her.

Let me know if you need me to do anything on my end.

(b)(6)

Field Director Federal Team/ Strategic Engagement
Strategic Customer Group

Johnson & Johnson HEALTH CARE SYSTEMS INC.

Mobile: (b)(6)

Fax: 866.485.2348

E-Mail: (b)(6)@its.jnj.com

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From: Scher, Deborah L. <Deborah.Scher@va.gov>

Sent: Tuesday, May 14, 2019 1:03 PM

To: (b)(6) [SCGUS] (b)(6)@its.jnj.com>

Subject: [EXTERNAL] RE: Terry Hubert info

Dear (b)(6):

Thank you very much for sending this. I have placed it in my bag to read on the plane.

As a follow-up to this morning's conversation, it would be helpful if you would please send me the names of the people to follow-up with in order to meet Dr. Stone's target timetable.

Separately, we are working to pull together the Women Veterans data we discussed.

Thank you very much for your terrific partnership this week.

Safe travels home,
Deborah

From: (b)(6) [SCGUS] (b)(6)@its.jnj.com>

Sent: Tuesday, May 14, 2019 12:23 PM

To: Scher, Deborah L. <Deborah.Scher@va.gov>

Subject: [EXTERNAL] (b)(6) info

Deborah

I wanted to send you this slide deck around the Suicide Prevention modeling we spoke to last night.

This would fall under the Healthy Heroes Precision Medicine workstream.

Looks like on slide 17 you can see that (b)(6) is the Data person from the VA.

Hope this helps frame out the work that is done from the VA prospective.

(b)(6)

Field Director Federal Team/ Strategic Engagement
Strategic Customer Group

Johnson & Johnson HEALTH CARE SYSTEMS INC.

Mobile:

(b)(6)

Fax: 866.485.2348

E-Mail: (b)(6)@its.jnj.com

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From: Manji, Hussein [JRDUS]
Sent: 29 May 2019 15:06:20 +0000
To: Scher, Deborah L.
Subject: [EXTERNAL] Re: VA Participation in a meeting?

Hi Deborah

Excellent. Let me connect you with one of the meeting organizers

Best

Hussein

Sent from my mobile, so please excuse typos and creative text autocorrections

On May 29, 2019, at 9:48 AM, Scher, Deborah L. <Deborah.Scher@va.gov> wrote:

Good Morning Hussein:

We have been discussing your panel and trying to zero in on who might be most effective. Is there any more information you might be able to share about the other panelists and the content focus you are hoping for, within the topic?

Thank you very much,
Deborah

From: Manji, Hussein [JRDUS] (b)(6) <[its.jnj.com](mailto:(b)(6)@its.jnj.com)>
Sent: Friday, May 24, 2019 1:55 PM
To: Scher, Deborah L. <Deborah.Scher@va.gov>
Subject: [EXTERNAL] VA Participation in a meeting?

Hi Deborah

Hope all is going well. I have been working with One Mind for Brain Research for a number of years (as you may recall, General (b)(6) was its CEO before retiring a year or so ago)

One area that they have entered is the area of workplace mental health – because we recognize that the workplace may be a major venue to really make a difference (raise awareness/reduce stigma, etc). In this regard, there is a “One Mind at Work” event in Napa, CA Sept 11, and I will be chairing/moderating a session, **How Research is Changing the Mental Health Landscape**

A panel of professionals will give an overview of the state of neuroscientific and mental health research in 2019 with specific commentary on how the evolving scientific understanding of mental health conditions, as well as the study mental

health in the workplace, are changing the landscape. In particular, what do these shifts mean for employers in terms of their attitudes and approaches?

Given the VA's tremendous presence in this space, I was wondering if you thought someone from the VA might be suitable to include in this Panel?

Best

(b)(7)

From: Manji, Hussein [JRDUS]
Sent: 26 May 2019 11:25:14 +0000
To: Scher, Deborah L.
Subject: [EXTERNAL] Re: VA Participation in a meeting?

Hi Deborah

Yes, the proverbial "small world", indeed! Glad that you will be attending.

Yes, if you could identify the leading VA researcher in the area, that would be terrific -- I think that it will be a nice addition to the Panel

Best

Hussein

From: Scher, Deborah L. <Deborah.Scher@va.gov>
Sent: Sunday, May 26, 2019 6:45 AM
To: Manji, Hussein [JRDUS]
Subject: RE: [EXTERNAL] VA Participation in a meeting?

Good Morning Hussein:

I hope you are having a wonderful holiday weekend and I am very much looking forward to meeting you in person in a few weeks.

Thank you for this thoughtful invitation. Funny how connected this world is! In the course of recruiting candidates for our Suicide Prevention leader, I was introduced to (b)(6) and (b)(6) who have been extremely helpful thought partners throughout this process. (b)(6) also invited me, and the person who we choose to fill this position, to attend this conference in September. I would be happy to also identify the leading VA researcher in this area if that would be helpful.

I very much appreciate your thinking of the VA for this panel.

Warmest regards,

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
U.S. Department of Veterans Affairs

From: Manji, Hussein [JRDUS] <(b)(6)@its.jnj.com>
Date: Friday, May 24, 2019, 1:55 PM
To: Scher, Deborah L. <Deborah.Scher@va.gov>
Subject: [EXTERNAL] VA Participation in a meeting?

Hi Deborah

Hope all is going well. I have been working with One Mind for Brain Research for a number of years (as you may recall, General (b)(6) was its CEO before retiring a year or so ago)

One area that they have entered is the area of workplace mental health – because we recognize that the workplace may be a major venue to really make a difference (raise awareness/reduce stigma, etc). In this regard, there is a “One Mind at Work” event in Napa, CA Sept 11, and I will be chairing/moderating a session, **How Research is Changing the Mental Health Landscape**

A panel of professionals will give an overview of the state of neuroscientific and mental health research in 2019 with specific commentary on how the evolving scientific understanding of mental health conditions, as well as the study mental health in the workplace, are changing the landscape. In particular, what do these shifts mean for employers in terms of their attitudes and approaches?

Given the VA’s tremendous presence in this space, I was wondering if you thought someone from the VA might be suitable to include in this Panel?

Best

Hussein

From: (b)(6) [JANUS]
Sent: 21 May 2019 05:12:42 +0000
To: Scher, Deborah L.
Subject: [EXTERNAL] Re: Introduction from (b)(6)
Attachments: image001.jpg

Deborah,

Nice to meet you, and moving (b)(6) to bcc with gratitude.

I am in San Francisco this week, and could do a call on Wednesday around noon your time. Please let me know if that is convenient.

Look forward to speaking,

(b)(6)

Sent from my iPhone

On May 20, 2019, at 12:40 PM, Scher, Deborah L. <Deborah.Scher@va.gov> wrote:

Dear (b)(6)

Thank you for going out of your way to make this introduction. I am most appreciative.

Dear (b)(6)

It is a pleasure to meet you by email. I watched your Tedtalk and was spellbound by your courage, your determination and your compassion.

When it fits with your schedule, I would welcome an opportunity to speak.

Warm regards,

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
US Department of Veterans Affairs

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From: (b)(6) [SCGUS] (b)(6) @its.inj.com>
Sent: Thursday, May 16, 2019 2:38 PM
To: Scher, Deborah L. <Deborah.Scher@va.gov> (b)(6) [JANUS] (b)(6) @its.inj.com>
Subject: [EXTERNAL] Introduction from (b)(6)

Deborah,

It has been a very busy week for us both and I wanted to be sure you are introduced to (b)(6) who is our Mental Health Ambassador for our Neuroscience division.

(b)(6) has had a very diverse background and thought he would be a great person for you to speak with as you look to bring in a Suicide Prevention Strategic Director.
I believe you are both already connected via LinkedIn.

I have copied (b)(6) above so you can work with your schedules to connect at a good time.

It is my pleasure to bring you two together.

Best Regards,

(b)(6)

Field Director Federal Team/ Strategic Engagement
Strategic Customer Group

<image001.jpg>

Mobile: (b)(6)

Fax: 866.485.2348

E-Mail: (b)(6)@its.jnj.com

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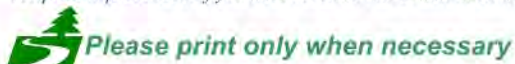
From: Scher, Deborah L.
Sent: 15 May 2019 18:39:18 +0000
To: Scher, Deborah L. (b)(6) (VHACO)
Subject: Contact Suggestions for Spravato Access
Attachments: RE: [EXTERNAL] FW: Contact suggestions for Spravato access.

From: (b)(6) (VHACO)
Sent: 15 May 2019 18:37:48 +0000
To: (b)(6)
Subject: RE: [EXTERNAL] FW: Contact suggestions for Spravato access.

Hi (b)(6) - how about either 10 or 10:30?

(b)(6)
Executive Assistant to the Principal Deputy Under Secretary for Health (10A)
Veterans Health Administration
Phone: (b)(6)
Mobile: (b)(6)
Fax: 202-273-7090

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From: (b)(6)
Sent: Wednesday, May 15, 2019 1:13 PM
To: (b)(6) (VHACO) (b)(6)@va.gov>
Subject: RE: [EXTERNAL] FW: Contact suggestions for Spravato access.

Good Afternoon (b)(6)

Do you have time for a call Thursday at 10:00, 10:30, 12:30, or 1:00?

Thank you,

(b)(6)
Portfolio Manager | Secretary's Center for Strategic Partnerships
Office of the Secretary
U.S. Department of Veterans Affairs
810 Vermont Ave., NW | Washington, DC 20420
Office: (b)(6)
Mobile: (b)(6)
[Follow us on Twitter](#)



From: Scher, Deborah L.
Sent: Wednesday, May 15, 2019 12:17 PM
To: (b)(6) (VHACO) (b)(6)@va.gov>
Cc: (b)(6)@va.gov>
Subject: RE: [EXTERNAL] FW: Contact suggestions for Spravato access.

Absolutely (b)(6) Let's make sure that happens.

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
U.S. Department of Veterans Affairs

From: (b)(6) (VHACO) (b)(6) @va.gov
Date: Wednesday, May 15, 2019, 11:14 AM
To: Scher, Deborah L. <Deborah.Scher@va.gov>
Cc: (b)(6) @va.gov
Subject: RE: [EXTERNAL] FW: Contact suggestions for Spravato access.

Hi Deborah – great to see you and was glad to be a part of the briefing! Would you be available to meet or for a call Thursday to go over next steps?

Thanks (b)(6)

(b)(6)
Executive Assistant to the Principal Deputy Under Secretary for Health (10A)
Veterans Health Administration
Phone (b)(6)
Mobile (b)(6)
Fax: 202-273-7090

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From: Scher, Deborah L.
Sent: Tuesday, May 14, 2019 10:40 PM
To: (b)(6) (VHACO) (b)(6) @va.gov
Subject: FW: [EXTERNAL] FW: Contact suggestions for Spravato access.

Hi (b)(6)
So nice to see you today. Let's discuss next next steps given the people and timetable outlined in (b)(6) note below.

Thank you. Hope the hearing goes well tomorrow,
Deborah

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
U.S. Department of Veterans Affairs

From: (b)(6) [SCGUS] (b)(6)@its.jnj.com>
Date: Tuesday, May 14, 2019, 10:31 PM
To: Scher, Deborah L. <Deborah.Scher@va.gov>
Subject: [EXTERNAL] FW: Contact suggestions for Spravato access.

A couple of thoughts regarding your ask around timeline.

Here are a couple of dates we need to have in the back of our head.

If we want a patient treated by June, you are going to need to:

1. Touch base with both Dr. (b)(6) and (b)(6) to see what needs to be done on their end to make that happen. (This will give (b)(6) a heads up for next week since the P&T meeting is going to be on May 21st.) This might make her uncomfortable but please reinforce that Dr. Stone asked for an update and this is the goal he has set out for all of us.
2. There might need to be something expedited with Dr. (b)(6) end. She is in charge of providing the national guidance since this is informing her phase 1 sites (Ketamine IV Sites) how she wants the drug to be delivered and monitored. I don't believe this was supposed to be presented till the June P&T (if it follows the same cadence of the May meeting, I am thinking this should happen around June 18th). Again delivering the same message above regarding Dr. Stone's goals, this might uncover other barriers I don't know about. This is past the 90 day timeline that Dr. Stone spoke to today. (Drug was available on March 17th, 90 days later is June 17th.)
3. Getting the list of 12 Ketamine sites should not be a problem, unless she tells you that she needs clearance to share that list with us. Might be something you can on your end to help expedite that so we can start to deploy our people in those sites and start to do the education needed to ensure a proper set up.

Does this help? If you need more detail I will be available tomorrow am. Just call me.

Hope you had a great rest of the day.

(b)(6)

Field Director Federal Team/ Strategic Engagement
Strategic Customer Group

Johnson & Johnson HEALTH CARE SYSTEMS INC.

Mobile: (b)(6)

Fax: 866.485.2348

E-Mail: (b)(6)@its.jnj.com

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From: (b)(6) [SCGUS]
Sent: Tuesday, May 14, 2019 4:12 PM

To: Scher, Deborah L. <Deborah.Scher@va.gov>
Subject: Contact suggestions for Spravato access.

Deborah

Thank you for continuing to help us with this important initiative.

The only people I could suggest to connect with are the 2 main people we are working with via your recommendations.

(b)(6) MD-Developing the National Guidance and putting together the phased approach.
(b)(6) Head of PBM P&T.

Another person which you spoke to today is (b)(6) MD. We have a great relationship with her, but was not sure how to use her appropriately. So if you have ideas I would be happy to connect with her.

Let me know if you need me to do anything on my end.

(b)(6)
Field Director Federal Team/ Strategic Engagement
Strategic Customer Group

Johnson & Johnson HEALTH CARE SYSTEMS INC.

Mobile: (b)(6)
Fax: 866.485.2348
E-Mail: (b)(6)@its.jnj.com

Providing services for Janssen Pharmaceutical Companies of Johnson & Johnson

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From: Scher, Deborah L. <Deborah.Scher@va.gov>
Sent: Tuesday, May 14, 2019 1:03 PM
To: (b)(6) [SCGUS] (b)(6) <[its.jnj.com](mailto:(b)(6)@its.jnj.com)>
Subject: [EXTERNAL] RE: (b)(6) info

Dear (b)(6)

Thank you very much for sending this. I have placed it in my bag to read on the plane.

As a follow-up to this morning's conversation, it would be helpful if you would please send me the names of the people to follow-up with in order to meet Dr. Stone's target timetable.

Separately, we are working to pull together the Women Veterans data we discussed.

Thank you very much for your terrific partnership this week.

Safe travels home,

Deborah

From: (b)(6) [SCGUS] (b)(6)@its.jnj.com>
Sent: Tuesday, May 14, 2019 12:23 PM
To: Scher, Deborah L. <Deborah.Scher@va.gov>
Subject: [EXTERNAL] (b)(6) info

Deborah

I wanted to send you this slide deck around the Suicide Prevention modeling we spoke to last night. This would fall under the Healthy Heroes Precision Medicine workstream.

Looks like on slide 17 you can see that (b)(6) is the Data person from the VA.

Hope this helps frame out the work that is done from the VA prospective.

(b)(6)

Field Director Federal Team/ Strategic Engagement
Strategic Customer Group

Johnson & Johnson HEALTH CARE SYSTEMS INC.

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Sent: 7 May 2019 11:38:42 +0000
To: Manji, Hussein [JRDUS]
Subject: Candidate update

Good morning Hussein:

I hope your week is off to a great start. Just wanted to give you an update on my candidate calls over the weekend and yesterday. Doctors (b)(6) and

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
US Department of Veterans Affairs

Mark Friedlander MD is the Chief Medical Officer for Aetna Behavioral Health. I worked with Mark on a broad range of issues including autism, mental health parity, treatments for depression, and strategies to address the opioid crisis. See <https://www.healthcarebusiness.com/healthcare-systems-and-fighting-suicide/> for an example of his public facing presence wrt suicide prevention. He is incredibly articulate, reasoned, and convincing. Overall, I hold him in the highest regard.

(b)(6) MD served in the Marine Corps before obtaining his medical degree. He rose to the rank of Captain before retiring, and is currently on staff at Island Hospital in Anacortes, WA. He worked for me in San Diego as the director of the Naval Center for Combat and Operational Stress Control and subsequently served as the director of the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury. See [https://www.linkedin.com/in/\(b\)\(6\)md-aa359555/](https://www.linkedin.com/in/(b)(6)md-aa359555/) and several military bios online. (b)(6) is very mission focused and did a terrific job building the Operational Stress Control center from scratch.

(b)(6) MD is the immediate past Chief Medical Officer for Magellan Behavioral Health. He retired in July 2018, so is potentially available. Please see [https://www.magellanproviderfocus.com/issues/summer-2018/features/dr-\(b\)\(6\)retires.aspx](https://www.magellanproviderfocus.com/issues/summer-2018/features/dr-(b)(6)retires.aspx) for his parting comments to Psychiatry colleagues. I worked closely with (b)(6) on mental health parity and care for substance abuse disorders. His great strength is his ability to pull health care professionals of all disciplines together into a coherent high achieving team.

(b)(6) MD is a retired Navy Captain whose Linked In profile lists him as Medical Director for the Semper Fi Fund. He was a

pioneer in Navy Medicine with respect to our understanding of psychological health. He served as BUMED Director of Deployment Health/Psychological Health, as well as a "plank owner" provider at the National Intrepid Center of Excellence. He is a proponent of integrative medicine and a compelling speaker. See

[https://semperfund.org/wp-content/uploads/2010/05/\(b\)\(6\)](https://semperfund.org/wp-content/uploads/2010/05/(b)(6).pdf)

(b)(6).pdf

From: Scher, Deborah L.
Sent: 20 May 2019 19:39:40 +0000
To: (b)(6) [SCGUS] (b)(6) [JANUS]
Subject: RE: Introduction from (b)(6)

Dear (b)(6)

Thank you for going out of your way to make this introduction. I am most appreciative.

Dear (b)(6)

It is a pleasure to meet you by email. I watched your Tedtalk and was spellbound by your courage, your determination and your compassion.

When it fits with your schedule, I would welcome an opportunity to speak.

Warm regards,

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
US Department of Veterans Affairs

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From: (b)(6) [SCGUS] (b)(6) [JANUS]@its.jnj.com>
Sent: Thursday, May 16, 2019 2:38 PM
To: Scher, Deborah L. <Deborah.Scher@va.gov> (b)(6) [JANUS] (b)(6)@its.jnj.com>
Subject: [EXTERNAL] Introduction from (b)(6)

Deborah,

It has been a very busy week for us both and I wanted to be sure you are introduced to (b)(6) who is our Mental Health Ambassador for our Neuroscience division.

(b)(6) has had a very diverse background and thought he would be a great person for you to speak with as you look to bring in a Suicide Prevention Strategic Director.

I believe you are both already connected via LinkedIn.

I have copied (b)(6) above so you can work with your schedules to connect at a good time.

It is my pleasure to bring you two together.

Best Regards,

(b)(6)
Field Director Federal Team/ Strategic Engagement
Strategic Customer Group

 HEALTH CARE SYSTEMS INC.

Mobile: (b)(6)

Fax: 866.485.2348

E-Mail: (b)(6)@its.jnj.com

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From: Scher, Deborah L.
Sent: 11 Jun 2019 13:57:28 +0000
To: (b)(6) [JANUS]
Subject: Thank you!

Dear (b)(6)

Thank you very much for making time to speak last week and for the very helpful information you shared. I have been reflecting on your key messages, particularly the absence of reliable outcomes data on mental health treatments. If there is a larger effort in this area, perhaps there are ways the VA could participate.

I hope our paths will cross in person in the near future and look forward to staying in touch.

With much appreciation for the important work you are doing,

Warm regards,

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
US Department of Veterans Affairs
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From: Scher, Deborah L.
Sent: 13 Jun 2019 09:42:04 +0000
To: Richter, Melinda [JRDUS]; Clancy, Carolyn
Cc: (b)(6) [JRDUS] (b)(6) [SCGUS] (b)(6) [SCGUS]
Subject: RE: [WARNING: ATTACHMENT UNSCANNED][EXTERNAL] Agenda for JLABS/VA Meeting and Portfolio Companies in your Areas of Interest

Good Morning Melinda:

Thank you for sharing these advance materials and for all of the time and effort your team has devoted to preparing such an exciting program. Dr. Clancy and I are very much looking forward to spending time with you all and beginning to build impactful collaborations around innovation together.

With much appreciation,
Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
U.S. Department of Veterans Affairs
www.va.gov/scsp

From: Richter, Melinda [JRDUS] (b)(6) @its.jnj.com>
Date: Wednesday, Jun 12, 2019, 1:33 PM
To: Scher, Deborah L. <Deborah.Scher@va.gov>, Clancy, Carolyn <Carolyn.Clancy@va.gov>
Cc: (b)(6) [JRDUS] (b)(6) @ITS.JNJ.com> (b)(6) [SCGUS]
(b)(6) @its.jnj.com> (b)(6) [SCGUS] (b)(6) @its.jnj.com>
Subject: [WARNING: ATTACHMENT UNSCANNED][EXTERNAL] Agenda for JLABS/VA Meeting and Portfolio Companies in your Areas of Interest

Dear Dr. Clancy and Deborah,

I hope you are both doing well and we are looking forward to seeing you again next week at JLABS @ NYC.

In advance of the meeting we wanted to send you two items:

1. Final Agenda including meeting participants and suggested meeting discussion points
2. Portfolio of JLABS companies developing solutions in the areas we discussed when we last met (Telemedicine, Mental Health and Women's Health). These companies represent a subset of the total JLABS portfolio and we are more than happy to facilitate introductions to any company here that you may be interested in engaging with now or in the future.

Please let me know if you have any comments or questions regarding either document.

Again, looking forward to seeing you on Monday.

Melinda

Melinda RICHTER

Global Head, Johnson & Johnson Innovation JLABS



+1 (b)(6)



(b)(6)@its.jnj.com

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From: Scher, Deborah L.
Sent: 17 Jun 2019 13:07:08 +0000
To: (b)(6)
Subject: FW: Research concerning pregnant Women Veterans

Good Morning:
Hope all your travels went well and your husband had a wonderful Father's Day.

Here is some initial background information on the topic we discussed.

Looking forward to a great day!
See you soon,

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
U.S. Department of Veterans Affairs
www.va.gov/scsp

From: Barry, Ashleigh <Ashleigh.Barry@va.gov>
Date: Friday, Jun 14, 2019, 1:48 PM
To: Scher, Deborah L. <Deborah.Scher@va.gov>
Subject: FW: Research concerning pregnant Women Veterans

Deborah:
Here is more information concerning our discussion around pregnant women Veterans. I shared a journal resource with (b)(6) and he was very helpful in compiling more information for you.

VA | U.S. Department of Veterans Affairs

Ashleigh Barry
Senior Advisor, Strategic Communications/Partnerships
Office of the Secretary
Secretary's Center for Strategic Partnerships
810 Vermont Avenue, NW
Washington DC 20420
O: (202) 461-7173 // C: (202) 740-7025
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From: (b)(6)
Sent: Friday, June 14, 2019 1:24 PM
To: Barry, Ashleigh <Ashleigh.Barry@va.gov>
Cc: (b)(6)@va.gov>
Subject: Research concerning pregnant Women Veterans

Ashleigh, listed below is research conducted on mental health concerns in pregnant Veterans.

Analysis: Mental health professionals working within the Veterans Affairs (VA) system and those working in non-VA settings are likely to encounter Women Veterans. According to the Journal of Women's Health, Women Veterans of Operation Enduring Freedom/Operation Iraqi Freedom experience mental health problems after military service at a higher rate than other Women Veterans.

Mental health conditions are higher among Women Veterans with an identified pregnancy than among those without. Pregnancy and mental health-related issues are of special concern because pregnancy can precipitate or exacerbate mental health conditions, and maternal anxiety during pregnancy can cause pre-term deliveries and lower birth weights. Key statistics regarding pregnant Women Veterans include:

- Studies suggest that OEF/OIF women are the fastest growing segments of new VA users, with as many as 44% of women returning from Operation Enduring Freedom/Operation Iraqi Freedom electing to use VA Healthcare.
- One study conducted among female Veterans with PTSD, found that, of the lifetime traumas they reported, sexual trauma (including military sexual trauma) was the most common, followed by physical assault; combat exposure was the least common.
- VA does not routinely capture pregnancy outcomes, it is difficult to determine the period of pregnancy among Women Veterans, and difficult to capture any services that may occur during this period. Nearly all VA maternity care is outsourced to private health care services and through DoD treatment facilities.
- Veterans with a pregnancy were also more likely to be enlisted service members rather than officers and more likely to be active duty service members at the time of last deployment rather than members of the Guard or Reserves.
- Overall, 32% of pregnant Women Veterans received one or more distinct mental health diagnoses, compared with 21% of Women Veterans without a pregnancy-related condition.

- Over 30% of pregnant Veterans sought care from VA mental health providers during their pregnancy, with an average of 6.6 mental health visits during the pregnancy.
- Nine percent of pregnant Veterans sought care for PTSD, 2% of pregnant Veterans received substance abuse counseling, and 1% of pregnant Veterans received care related to sexual trauma.
- Women Veterans are more likely than nonveteran women to be overweight or obese, have painful musculoskeletal issues, be diagnosed with depression and/or post traumatic stress disorder, engage in smoking, have poorer self-reported physical and mental health, and have lower social support.
- VA offers free mental health tools for Women Veterans suffering from postpartum depression. They are an Anonymous Screening Tool, a Women Veterans Call Center, Veterans Crisis Line, an online Maternal Mental Health site, VA Medical Centers and MomMoodBooster. MomMoodBooster is funded by VA Women's Health Services and VA Office of Rural Health. This initiative offers:
 1. An online treatment program for postpartum depression
 2. Six counseling sessions over six weeks
 3. Online treatment
 4. Regular phone coach support

Summary: The number of Women Veterans is rapidly expanding and has specific mental health concerns which are different than male Veterans. While the research I conducted does not directly correlate combat service as a major factor in Women Veteran's mental health or PTSD diagnoses, it could in the future. Also, research demonstrates women exposed to combat, experience PTSD at a higher rate than male Veterans. Many hazardous-duty restrictions for women were lifted, with numerous women serving in combat-supported missions throughout Iraq and Afghanistan.

While the VA has mental health services in place for Women Veterans, most of the information is not as accessible as general information about Veterans. VA also has several programs in place to help Women Veterans treat postpartum depression, as well as traditional mental health programs available to anyone receiving VA health care.

References:

https://www.research.va.gov/topics/womens_health.cfm

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3052271/>

https://www.nursingcenter.com/cearticle?an=00000446-201611000-00027&Journal_ID=54030&Issue_ID=3847557#P13

https://www.nacvso.org/images/company_assets/ca5e4709-02f5-4f0b-a1d7-317e0aaf5cac/files/About/Women%20Veterans/Cyber%20Seminars/Women%20Veterans%20-%20Reproductive%20Health%20Across%20the%20Life%20Course.pdf

<https://academic.oup.com/tbm/article/8/3/419/5001937>

Thanks for providing an opportunity to assist.

Very respectfully,

(b)(6)

Communications & Portfolio Manager
Secretary's Center for Strategic Partnerships
U.S. Department of Veterans Affairs
810 Vermont Avenue, NW
Washington, DC 20420

(b)(6)

(Phone)
(Mobile)

"I can imagine no more rewarding a career. And any man who may be asked in this century what he did to make his life worthwhile, I think can respond with a good deal of pride and satisfaction: 'I served in the United States Navy.'" – President John F. Kennedy

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VACO 001B FOIA Inbox

From: Scher, Deborah L.
Sent: Wednesday, May 29, 2019 1:43 PM
To: (b)(6) SCGUSJ
Subject: Draft Presentation for June 17th
Attachments: Driving Innovation Together-shortened 5.29.19.pptx

Dear (b)(6),

I hope you had a wonderful holiday weekend with your family.

Hard to believe it is almost June! In preparation for our meeting on the 17th, we are finalizing a document on Women Veterans and also produced this shorter version of the VA Healthcare 2019 presentation. We streamlined the narrative, removed the IBM Watson video and the section on social determinants of health (LinkedIn, Feeding America etc). It is about 30 minutes now. I would welcome your feedback.

So glad we have a call on the calendar with (b)(6)

Let's catch up live soon.

Best,
Deborah

Driving Innovation Together

Department of Veterans Affairs

VA Healthcare 2019

Gaylord National Harbor

May 13, 2019

DEBORAH LAFER SCHER

Executive Advisor to the Secretary

Secretary's Center For Strategic Partnerships

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(19-08160-F) - 001121

VA Partnerships in Primetime



VA



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(19-08160-F) - 001122

VA Secretary Robert Wilkie



“All of us are committed to active engagement and productive partnerships so we can, together, change Veterans’ lives for the better. At VA, we take pride in our legacy of groundbreaking, game-changing contributions to American medicine.”



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(19-08160-F) - 001123

Secretary Wilkie's Priorities

- Customer Service
- MISSION Act
- Business Transformation
- VA/DoD Collaboration



VA



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(19-08160-F) - 001124

Secretary Wilkie's Priorities

Customer Service

- The University of Delaware, in partnership with the VA Veterans Experience Office, created the VA Patient Experience Academy in 2018.
- The program generated a 90 percent satisfaction rate for Veterans.



VA



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(19-08160-F) - 001125

Secretary Wilkie's Priorities



Mission Act

- Community care expansion underway (June 6)
- 20 days for primary care and mental health care services
- 30 minute average drive time for primary care, and mental health care services
- 60 minute average drive time for specialty care



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(19-08160-F) - 001126

Secretary Wilkie's Priorities

Business Transformation

- Electronic Health Record – Cerner contract
- Financial Management Business Transformation
- Supply Chain Management



VA



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(19-08160-F) - 001127

Secretary Wilkie's Priorities



VA/DoD Collaboration

- Suicide Prevention
- Supply Chain
- Transition Assistance Program (TAP)
- Cerner Electronic Health Record



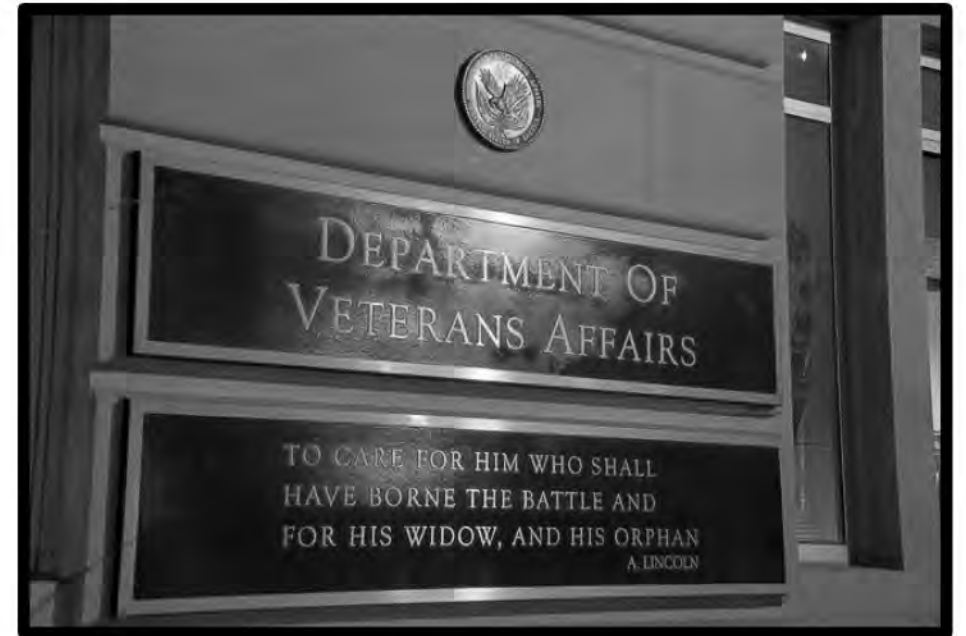
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VA at a Glance

U.S. Department of Veterans Affairs

- More than 20 million living Veterans
- More than 9 million Veterans enrolled in VA
- 170 medical centers
- 1,074 outpatient sites
- 58 million patient appointments, 2018
- 370,000 employees



VA



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(19-08160-F) - 001129

VA Healthcare Innovations

- 1st health care organization to eradicate Hepatitis C
- 1st health care organization to publish opioid rates and then lower them by 40 percent
- Million Veteran Program – 750,000 Veterans enrolled, 700,000 gene mutations, 100,000 whole genomes sequenced
- Blue Button – Veterans own their healthcare information



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Secretary's Center for Strategic Partnerships

Mission

- To seek out big, bold and impactful collaborations that significantly improve the lives of Veterans

Authority

- Leadership has delegated authority from the VA Secretary to solicit and receive donations

Partnering

- Working with SCSP, organizations can donate resources (monetary or non-monetary) directly to the VA or provide free services or products for Veterans



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Partners



U.S. Department of Veterans Affairs

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Leading the Nation in Telehealth

Increasing Access for Veterans

- 1 million+ telehealth appointments annually
- 1/3 of Veterans live in rural areas
- 136,000+ Veterans use VA Remote Patient Monitoring/Home Telehealth Services



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Leading the Nation in Telehealth

Extending the VA Care Footprint

- Veterans often have to drive great distances to receive care
- Some live in areas without sufficient broadband for video telehealth.
- 90% of Americans live within 10 miles of a Walmart. 90% of Veterans don't live within 10 miles of a VA Medical Center



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(19-08160-F) - 001134

Leading the Nation in Telehealth

Extending the VA Care Footprint

- Philips committed to donate equipment, and create dedicated space for telehealth sessions
- 10 rural access points at VFW & American Legion Halls
- Eventually expand to 100 locations



Photo Credit: Philips North America



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(19-08160-F) - 001135

Leading the Nation in Telehealth

Philips prototype featured in parade



Photo Credit: Shane Corcoran for Philips North America



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(19-08160-F) - 001136

Building a Precision Oncology Ecosystem



Building a Precision Oncology Ecosystem

- Prostate cancer is the most frequently diagnosed cancer among Veterans
- Prostate Cancer Foundation committed \$50M for 10 VA Centers for Excellence
- VA building on this network to create a Precision Oncology System of Excellence



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Building a Precision Oncology Ecosystem



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(19-08160-F) - 001139

Precision Medicine

Sanford Health Partnership

- Sanford Health made a **\$50M commitment** for Veterans to receive free pharmacogenetic testing through Pharmacogenomics Action for Cancer Survivorship (PHASeR) program
- VA plans to reach **250,000 Veterans** by 2022

“This screening test will help providers at the VA prescribe the most appropriate medications at the right dose for cancer survivors. Our goal is to continue delivering the best care possible for our nation’s heroes, and this partnership helps us do just that.”

~ VA Secretary Robert Wilkie



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Mental Health

Suicide Prevention

- Presidential Executive Order enacted to help end a national tragedy of suicide: PREVENTS Initiative
- Everyone has a role to help reverse this tragic crisis
- VA and Johnson & Johnson partnered to offer the newly approved Spravato nasal spray for treatment-resistant depression



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(19-08160-F) - 001141

Mental Health



Be There Campaign

- VA placed ads in the 100 largest markets to promote both #BeThere campaign and the Veterans Crisis Line.
- Times Square receives 355,000 visitors daily.
- The program will include 700 billboards in the top 100 markets.



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(19-08160-F) - 001142

Piloting Health Care Innovation

3D Printing

- Allows physicians to see patient anatomy in its true 3-dimensional form
- Embraced by radiologists and surgeons
- 23 VA sites with 3D printing capabilities with more to come



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(19-08160-F) - 001143

Piloting Health Care Innovation



VA



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(19-08160-F) - 001144

Driving Innovation Together



Partner with us to further:

- Secretary Robert Wilkie's Key Priorities
- Big, Bold, Impactful collaborations that change Veterans' lives
- Healthcare innovation



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sp@va.gov

Website

www.va.gov/scsp

VA



U.S. Department of Veterans Affairs

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From: (b)(6) on behalf of [Clancy, Carolyn](#)
To: [Scher, Deborah L.](#)
Cc: (b)(6)
Subject: Johnson & Johnson Innovation JLABs Site Visit [Read Aheads Attached]
Attachments: [JLABs Suggested May 28th for our NYC visit. Would that work .msg](#)
[FW VA visit to NYC JLABS .msg](#)
[In Person VA Meeting at NYC AGENDA_FINAL.docx](#)
[JLAB Portfolio Telemed-MH-WH.pdf](#)
[image002.png](#)
[image004.png](#)
[image006.png](#)
[image008.png](#)
[image010.png](#)
[image012.png](#)
[image014.png](#)
[image016.png](#)

From: Richter, Melinda [JRDU] (b)(6)@its.jnj.com <mailto:(b)(6)@its.jnj.com>

Date: Wednesday, Jun 12, 2019, 1:33 PM

To: Scher, Deborah L. <Deborah.Scher@va.gov <mailto:Deborah.Scher@va.gov>>, Clancy, Carolyn <Carolyn.Clancy@va.gov <mailto:Carolyn.Clancy@va.gov>>

Cc: (b)(6) [JRDU] (b)(6)@ITS.JNJ.com <mailto:(b)(6)@ITS.JNJ.com> (b)(6) [SCGUS] (b)(6)@its.jnj.com <mailto:(b)(6)@its.jnj.com>> (b)(6) [SCGUS] (b)(6)@its.jnj.com <mailto:(b)(6)@its.jnj.com>>

Subject: [WARNING: ATTACHMENT UNSCANNED][EXTERNAL] Agenda for JLABS/VA Meeting and Portfolio Companies in your Areas of Interest

Dear Dr. Clancy and (b)(6)

I hope you are both doing well and we are looking forward to seeing you again next week at JLABS @ NYC.

In advance of the meeting we wanted to send you two items:

1. Final Agenda including meeting participants and suggested meeting discussion points
2. Portfolio of JLABS companies developing solutions in the areas we discussed when we last met (Telemedicine, Mental Health and Women's Health). These companies represent a subset of the total JLABS portfolio and we are more than happy to facilitate introductions to any company here that you may be interested in engaging with now or in the future.

Please let me know if you have any comments or questions regarding either document.

Again, looking forward to seeing you on Monday.

Melinda

Melinda RICHTER

Global Head, Johnson & Johnson Innovation JLABS

+ (b)(6)

(b)(6)@its.jnj.com <mailto:(b)(6)@its.jnj.com>

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Subject:

Subject:

Meeting with VA at JLABS @ NYC

LOGISTICS:

Location: JLABS @ NYC

Date: June 17, 2019

Schedule: 11 am to 3 pm ET (VA departing for train station promptly at 3 pm)

ATTENDEES:

First Name	Last Name	Title	Org	Session	Role
Deborah	Scher	Executive Advisor, Secretary's Center for Strategic Partnerships	VA	all day	VA lead
Carolyn	Clancy	Deputy Under Secretary for Discovery, Education and Affiliate Networks (10X)	VA	all day	VA lead
Melinda	Richter	Global Head of JLABS	JLABS	all day	JLABS lead
(b)(6)		Director, Sourcing Innovation	JLABS	all day	JLABS lead
		Head, JLABS @ NYC	JLABS	morning tour and afternoon	JLABS @ NYC lead and telemedicine expert
		Field Director, Federal Accounts	JNJ	all day	Meeting organizer
		Head of Institutional Business Group	JNJ	all day	Meeting organizer
		Sr Director, Strategy and Operations	JNJ	all day	Strategic framework for GEI
Joanne	Waldstreicher	Chief Medical Officer	JNJ	afternoon	women's health expert
Husseini	Manji	Global TA Head, Neuroscience	JNJ	afternoon	mental health expert
(b)(6)		Global Director, Digital Innovation	JNJ	afternoon	telemedicine expert
		Vice President, External Innovation, Regulatory Sci., and Exec Dir Scientific Partnerships, JLABS @ Washington DC	JNJ	afternoon	Strategic framework for GEI and JLABS @ Washington DC
		Global Head of Healthtech Strategy	JNJ	afternoon	telemedicine expert
		VP, Data Sciences	JNJ	afternoon	mental health expert
		VP, Glutamatergic Pathway	JNJ	afternoon	mental health expert
		Area Leader	JNJ	afternoon	mental health expert

AGENDA:

Time	Topic	Goal/Discussion Points	Who
11-11:15 am 15 min	Lunch	Introductions	Lead: (b)(6) JLABS, VA, (b)(6) (b)(6)
11:15-11:45 am 30 min	Kick-Off/JLABS Model Overview & Site Tour	Site Tour (b)(6) 15 min JLABS overview (b)(6) 15 min	Lead: (b)(6) Tour Lead: (b)(6) JLABS, VA, (b)(6) (b)(6)
11:45 – 1:15 pm 90 min	Considering Strategic Collaborations between JLABS and VA	Overview from VA re: priorities Deborah 30 min Overview of existing collaborations (JLABS/BARDA arrangements) (b)(6) 20 min Discussion All 35 min <ul style="list-style-type: none"> VA strategic areas of focus for possible JLABS collaboration Understanding VA collaboration landscape (What is possible? Are there limitations/restrictions?) How can the JLABS model assist the VA in addressing its challenges within that framework? Wrap up All 5 min	Lead: (b)(6) JLABS, VA, (b)(6) (b)(6)
1:15 – 1:25 pm 10 min	Break		
1:25-3 pm 95 min	Education and Ongoing Activities in VA Areas of Interest (Telehealth, Women's Health and Mental Health)	JNJ Overview of work in different areas Leads 45 min <ul style="list-style-type: none"> Telehealth (b)(6) 15 min Women's Health (b)(6) 15 min Mental Health Husseini 15 min Discussion re: areas for collaboration All 45 min <ul style="list-style-type: none"> Roundtable/VA Q&A on telehealth, women's health and mental health Assessing potential for collaboration in these areas Leveraging the JLABS model as a conduit to VA success in these areas Wrap up All 5 min	Lead: (b)(6) VA, JNJ reps Telehealth (b)(6) (b)(6) Women's Health: Joanne Waldstreicher, Mental Health: Husseini Manji (b)(6)

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<<https://jlabs.jninnovation.com/quickfire-challenges>>

Check out our exciting events in your region

Northern California <https://jlabshub.splashthat.com/?f%5B0%5D=event_region%3A1736&menu_id=menu_link_content%3Ac8a190f8-5e3f-4474-afe9-4831f3253473> | Southern California <https://jlabshub.splashthat.com/?f%5B0%5D=event_region%3A1736&menu_id=menu_link_content%3Ac8a190f8-5e3f-4474-afe9-4831f3253473> | New York
<https://jlabshub.splashthat.com/?f%5B0%5D=event_region%3A1736&menu_id=menu_link_content%3Ac8a190f8-5e3f-4474-afe9-4831f3253473> | Boston & East Coast <https://jlabshub.splashthat.com/?f%5B0%5D=event_region%3A1736&menu_id=menu_link_content%3Ac8a190f8-5e3f-4474-afe9-4831f3253473> | Texas <https://jlabshub.splashthat.com/?f%5B0%5D=event_region%3A1736&menu_id=menu_link_content%3Ac8a190f8-5e3f-4474-afe9-4831f3253473> | Canada <https://jlabshub.splashthat.com/?f%5B0%5D=event_region%3A1736&menu_id=menu_link_content%3Ac8a190f8-5e3f-4474-afe9-4831f3253473> | Europe
<https://jlabshub.splashthat.com/?f%5B0%5D=event_region%3A1736&menu_id=menu_link_content%3Ac8a190f8-5e3f-4474-afe9-4831f3253473> | Asia
<https://jlabshub.splashthat.com/?f%5B0%5D=event_region%3A1736&menu_id=menu_link_content%3Ac8a190f8-5e3f-4474-afe9-4831f3253473>

From: "Scher, Deborah L." <Deborah.Scher@va.gov <<mailto:Deborah.Scher@va.gov>>>
Date: Wednesday, April 10, 2019 at 9:09 AM
To: (b)(6) <(b)(6)@va.gov <[mailto:\(b\)\(6\)@va.gov](mailto:(b)(6)@va.gov)>>
Cc: "Clancy, Carolyn" <Carolyn.Clancy@va.gov <<mailto:Carolyn.Clancy@va.gov>>>
Subject: Visit to JLab in NYC

Good Morning (b)(6)

Dr. Clancy and I would like to plan this one day trip as soon as she has availability. When you get a chance, would you mind please letting me know some days in the next few weeks that would work with her schedule?

Thank you very much,
Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
US Department of Veterans Affairs

From: [Scher, Deborah L.](#)
To: (b)(6)
Cc: [Clancy, Carolyn](#)
Subject: J Labs Suggested May 28th for our NYC visit. Would that work?
Date: Monday, April 15, 2019 12:30:34 PM

Deborah
Deborah Lafer Scher
Executive Advisor to the Secretary
Secretary's Center for Strategic Partnerships
US Department of Veterans Affairs

From: (b)(6) on behalf of (b)(6) SCGUS]
To: (b)(6) SCGUS]; Richter, Melinda [JRDUS]; (b)(6) [JRDUS];
(b)(6) [JAN]; Scher, Deborah L.; (b)(6) [JJCUS]; (b)(6) COBIUS];
(b)(6) GCSOUS]; (b)(6) CNTUS]; (b)(6) [US]
Subject: FW: VA visit to NYC JLABS

Here is the official invite from JnJ

-----Original Appointment-----

From: (b)(6) SCGUS]; (b)(6) @its.jnj.com>

Sent: Tuesday, May 07, 2019 3:37 PM

To: (b)(6) SCGUS]; (b)(6) SCGUS]; Richter, Melinda [JRDUS]; (b)(6) JRDUS; (b)(6) [JAN]; Scher,
Deborah L.; (b)(6) JJCUS]; (b)(6) COBIUS]; (b)(6) GCSOUS]; (b)(6) CNTUS]; (b)(6)
(b)(6) [US]

Subject: [EXTERNAL] VA visit to NYC JLABS

When: Monday, June 17, 2019 11:00 AM-5:00 PM (UTC-05:00) Eastern Time (US & Canada).

Where: 101 6th Ave, New York, NY 10013

Meeting with VA at JLABS @ NYC

LOGISTICS:

Location: JLABS @ NYC

Date: June 17, 2019

Schedule: 11 am to 3 pm ET (VA departing for train station promptly at 3 pm)

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		VP, Data Sciences	JNJ	afternoon	mental health expert
		VP, Glutamatergic Pathway Area Leader	JNJ	afternoon	mental health expert

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